

STATEMENT HEALTH ANNUAL

AS OF DECEMBER 31, 2018 OF THE CONDITION AND AFFAIRS OF THE

Aetna Health Inc. (a Michigan corporation)

NAIC Organized index the laws of	NAIC Group Code (C	(Current)	(Prior)	NAIC Company Code	95756 of Domi	ode 95756 Employer's ID Number State of Dominia or Bod of Entry	23-2861565
Country of Domicile	-		70	United States of America	r America		
Licensed as business type:	***************************************			Health Maintenance Organization	Organizati	on	
Is HMO Federally Qualified? Yes [Yes[] No[X]						
Incorporated/Organized	Ō	09/10/1996			Commend	Commenced Business	04/01/1998
Statutory Home Office	28588 Northwestern Highway, Sutte 100 (Street and Number)	rthwestern Highway, (Street and Number)	lighway, S Vumber)	uite 100		Southfield (City or Town, Stat	Southfield, MI, US 48034 (City or Town, State, Country and Zip Code)
Main Administrative Office	Southfield, MI, US	48034	2	28588 Northwestern Highway, Suite 100 (Street and Number)	ghway, Suit umber)		348-357-7766
(City or	(City or Town, State, Country and Zip Code)	y and Zip	Code)			(Area Code) ((Area Code) (Telephone Number)
Mail Address	28588 Northwestern Highway, Suite 100 (Street and Number or P.O. Box)	em Highw ımber or	ay, Suite 1 P.O. Box)	(00		Southfield (City or Town, Stat	Southfield, MI, US 48034 (City or Town, State, Country and Zip Code)
Primary Location of Books and Records	i Records			1425 Union Meeting Road	eting Road		
	Blue Bell, PA 19422	9422		(Street and Number)	nmber)	008	800-872-3862
(City or	(City or Town, State, Country and Zip Code)	y and Zip	Code)			(Area Code)	(Area Code) (Telephone Number)
Internet Website Address				www.aetna.com	moo		
Statutory Statement Contact		Ö	Cara S. Mullen	eu			215-775-6508
Aei		gaetna.co	(Name) m			(Area Co	(Area Code) (Telephone Number) 880-262-7767
	(E-mail Address)	ss)				(FA)	(FAX Number)
	ָם קמפר (מפר (מפר (מפר (מפר (מפר (מפר (מפר (7	Kriefin Mare Dong	OFFICERS		Vice Dresident and Treasurer	Vanoratiok Managa
Vice President and Secretary	Secretary	Edwa	Edward Chung-I Lee	Lee			-
Kevin James Casey, Senior Investment Officer Timothy James Oison, Principal Financial Officer & Controller #	Kevin James Casey, Senior Investment Officer James Olson, Principal Financial Officer & Cor	it Officer er & Cont	roller#	OTHER Frank Ferris Chronister III, Assistant Controller #	۲ ster III, Assi		Gregory Stephen Martino, Vice President Scott Leland Spradiin, Senior Medical Director
Suzanne	Suzanne Marie Hall			DIRECTORS OR TRUSTEES Kristin Myers Peng	TRUSTEE s Peng	ES	Scott Leland Spradlin

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and iabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement instructions and Accounting Practices and Procedures, according to the extent that (1) state law may differ; or, that state rules, or requirement required to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this aftestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact capp (except for farmatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

Kristin Myers/F President

State of....... Pennsylvania County of.... Montgomery

Subscribed and sworn to before me this

2019 January day of_

NOTARY PUBLIC (Seal)

COMMONWEALTH OF PENNSYLVAN

NOTARIAL SEAL KIM E. ROTH, Notary Public Whitpain Township, Montgomery County My Commission Expires April 25, 2021

Edward Chung-I Lee Vice President and Secretary

State of...... Connecticut County of.... Hartford

Subscribed and sworn to before me this

2019 H day of FEED

Notary Public, State of Connecticut

Vice President and Treasurer

State of...... Connecticut County of.... Hartford

Subscribed and sworn to before me this

2019 NOTARY PUBLIC (Seal) day of

AND DIANE IN COLLAKU

AND Notary Public, State of Connecticut

AND Notary Publ DIANE M COLLAZO

Yes[X] No[

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ASSETS

	Ī	_	Current Year		Prior Year
		1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1.	Bonds (Schedule D)	1, 150, 383	0	1,150,383	1, 151,228
2.	Stocks (Schedule D):				
	2.1 Preferred stocks	0	0	0	0
	2.2 Common stocks	0	0	0	0
3.	Mortgage loans on real estate (Schedule B):				
	3.1 First liens		0	0	0
	3.2 Other than first liens	0	0	0	0
	Real estate (Schedule A):				
	4.1 Properties occupied by the company (less \$	0	0	0	0
	encumbrances)	0	0	0	0
	4.2 Properties held for the production of income (less \$	0	0	0	0
	4.3 Properties held for sale (less \$0	0		0	
	encumbrances)	0	0	0	0
5.	Cash (\$800,000 , Schedule E - Part 1), cash equivalents				
Э.	(\$				
	investments (\$	1 182 066	0	1 182 066	376 422
6.	Contract loans, (including \$0 premium notes)				
7.	Derivatives (Schedule DB)				
8.	Other invested assets (Schedule BA)				
9.	Receivables for securities	0	0	0	0
10.	Securities lending reinvested collateral assets (Schedule DL)	0	0	0	0
11.	Aggregate write-ins for invested assets		0		
12.	Subtotals, cash and invested assets (Lines 1 to 11)	2,332,449	0	2,332,449	1,527,650
13.	Title plants less \$0 charged off (for Title insurers				
	only)		0		
14.	Investment income due and accrued	481	0	481	476
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection	0	0	0	0
	15.2 Deferred premiums and agents' balances and installments booked but				
	deferred and not yet due (including \$0 earned but unbilled premiums)	0	0	0	0
	15.3 Accrued retrospective premiums (\$			ļ	
	contracts subject to redetermination (\$	0	0	0	0
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers	0	0	0	0
	16.2 Funds held by or deposited with reinsured companies	0	0	0	0
	16.3 Other amounts receivable under reinsurance contracts	0	0	0	0
	Amounts receivable relating to uninsured plans			0	0
	Current federal and foreign income tax recoverable and interest thereon			1,631	3,712
18.2	Net deferred tax asset		0	0	0
19.	Guaranty funds receivable or on deposit				0
20.	Electronic data processing equipment and software	0	0	0	0
21.	Furniture and equipment, including health care delivery assets	0	_	_	^
22.	(\$				0
22. 23.	Receivables from parent, subsidiaries and affiliates				0
23. 24.	Health care (\$0) and other amounts receivable				0
25.	Aggregate write-ins for other than invested assets		0	0	0
26.	Total assets excluding Separate Accounts, Segregated Accounts and				
	Protected Cell Accounts (Lines 12 to 25)	2,334,561	0	2,334,561	1,531,838
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0	0
28.	Total (Lines 26 and 27)	2,334,561	0	2,334,561	1,531,838
	DETAILS OF WRITE-INS				
1101.			0	0	0
1102.			0	0	0
1103.		0	0	0	0
1198.	Summary of remaining write-ins for Line 11 from overflow page		0	ļ0	0
1199.	Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0	0
2501.			0	0	0 -
2502.		0	0	0	0
2503. 2598.	Summary of remaining write-ins for Line 25 from overflow page	U	0	0	0
	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	0	0	0	0
∠აუუ.	רטנמים (בווופס בטטד נוווע בטטס pius בטשט)(בווופ בס above)	U	ı	i U	U

LIABILITIES, CAPITAL AND SURPLUS

			Current Year		Prior Year
		1	2	3	4
		Covered	Uncovered	Total	Total
1.	Claims unpaid (less \$0 reinsurance ceded)		0		0
2.	Accrued medical incentive pool and bonus amounts		0	0	0
3.	Unpaid claims adjustment expenses		0	0	0
4.	Aggregate health policy reserves, including the liability of				
٦.	\$0 for medical loss ratio rebate per the Public				
	Health Service Act	0	0	0	0
5.	Aggregate life policy reserves		0	0	0
6.	Property/casualty unearned premium reserves.				0
7.	Aggregate health claim reserves				0
8.	Premiums received in advance				
9.	General expenses due or accrued		0		130
	Current federal and foreign income tax payable and interest thereon				100
10.1	(including \$0 on realized capital gains (losses))	0	0	0	0
10.2	Net deferred tax liability		0	0	0
11.	Ceded reinsurance premiums payable				0
12.	Amounts withheld or retained for the account of others				0
13.	Remittances and items not allocated.		0	0	0
14.	Borrowed money (including \$0 current) and				
14.	interest thereon \$0 (including				
	\$ 0 current)	0	0	0	0
15.	Amounts due to parent, subsidiaries and affiliates				6,477
16.	Derivatives			· · · · · · · · · · · · · · · · · · ·	0
17.	Payable for securities				0
18.	Payable for securities lending		0	0	0
19.	Funds held under reinsurance treaties (with \$0				
13.	authorized reinsurers, \$				
	reinsurers and \$0 certified reinsurers)	0	0	0	0
20.	Reinsurance in unauthorized and certified (\$				
20.	companies	0	0	0	0
21.	Net adjustments in assets and liabilities due to foreign exchange rates				٥
22.	Liability for amounts held under uninsured plans		0	0	0
23.	Aggregate write-ins for other liabilities (including \$				
	current)	0	0	0	0
24.	Total liabilities (Lines 1 to 23).	3.593	0	3.593	6.607
25.	Aggregate write-ins for special surplus funds	,	XXX	,	0
26.	Common capital stock				10
27.	Preferred capital stock				0
28.	Gross paid in and contributed surplus				8,599,990
29.	Surplus notes				0
30.	Aggregate write-ins for other than special surplus funds			0	0
31.	Unassigned funds (surplus)			(7,069,032)	
32.	Less treasury stock, at cost:				(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
02.	32.10 shares common (value included in Line 26				
	\$	xxx	XXX	0	0
	32.20 shares preferred (value included in Line 27				
	\$	xxx	XXX	0	0
33.	Total capital and surplus (Lines 25 to 31 minus Line 32)		XXX	2,330,968	1,525,231
34.	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	2,334,561	1,531,838
	DETAILS OF WRITE-INS			,,	, ,
2301.	DETAILS OF WHITE INC	0	0	0	0
2302.			0	0	0
2303.			0	0	0
2398.	Summary of remaining write-ins for Line 23 from overflow page		0	0	
2399.	Totals (Lines 2301 thru 2303 plus 2398)(Line 23 above)	0	0	0	0
2501.	10ta/s (Ellies 2007 tilla 2000 plus 2000)(Ellie 20 above)		XXX	· ·	0
2501.			XXX	0	n
2502.			XXX	0	n
2598.	Summary of remaining write-ins for Line 25 from overflow page		XXX	0	n
2596. 2599.	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	XXX	XXX	0	0
3001.	Totals (Lines 2301 tillu 2303 pius 2396)(Line 23 above)			0	0
3001.				0	0
3002.				0	0
JUUJ.					
3098.	Summary of remaining write-ins for Line 30 from overflow page	VVV	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	STATEMENT OF REVENUE AN	Current Y		Prior Year
		1 Current Y	2	3
		Uncovered	Total	Total
1.	Member Months	XXX	0	0
2.	Net premium income (including \$ non-health premium income)	XXX	0	0
3.	Change in unearned premium reserves and reserve for rate credits	xxx	0	0
4.	Fee-for-service (net of \$0 medical expenses)			0
	Risk revenue			
5.				
6.	Aggregate write-ins for other health care related revenues			0
7.	Aggregate write-ins for other non-health revenues	XXX	0	0
8.	Total revenues (Lines 2 to 7)	XXX	0	0
	Hospital and Medical:			
9.	Hospital/medical benefits	0	(1,497)	0
10.	Other professional services	0	0	0
11.	Outside referrals	0	0	0
12.	Emergency room and out-of-area			0
13.	Prescription drugs			
14.	Aggregate write-ins for other hospital and medical.			
15.	Incentive pool, withhold adjustments and bonus amounts			
16.	Subtotal (Lines 9 to 15)	0	(1,497)	0
	Less:			
17.	Net reinsurance recoveries	0	0	0
18.	Total hospital and medical (Lines 16 minus 17)	0	(1,497)	0
19.	Non-health claims (net)	0	0	0
20.	Claims adjustment expenses, including \$0 cost containment expenses			
			10,228	
21.	General administrative expenses		10,228	120
22.	Increase in reserves for life and accident and health contracts (including \$0			
	increase in reserves for life only)	0	0	0
23.	Total underwriting deductions (Lines 18 through 22)	0	8,731	728
24.	Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	(8,731)	(728
25.	Net investment income earned (Exhibit of Net Investment Income, Line 17)			
26.	Net realized capital gains (losses) less capital gains tax of \$			
	Net investment gains (losses) (Lines 25 plus 26)		15,993	12,215
27.	- ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '			12,210
28.	Net gain or (loss) from agents' or premium balances charged off [(amount recovered			
	\$0) (amount charged off \$	0	0	
29.	Aggregate write-ins for other income or expenses	0	0	0
30.	Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus			
	27 plus 28 plus 29)	XXX	7,262	11,487
31.	Federal and foreign income taxes incurred	XXX	1,525	4,021
32.	Net income (loss) (Lines 30 minus 31)	XXX	5,737	7,466
	DETAILS OF WRITE-INS			
0601.		XXX	0	0
0602.			0	(
0603			0	(
0698.		XXX	0	
0699.		XXX	0	٠
	Totals (Lines 0601 thru 0603 plus 0698)(Line 6 above)			
0701.		XXX	0	ا
0702.		XXX	0	اا
0703		XXX	0	(
0798.	Summary of remaining write-ins for Line 7 from overflow page	XXX	0	(
0799.	Totals (Lines 0701 thru 0703 plus 0798)(Line 7 above)	XXX	0	(
1401.		0	0	(
1402.		0	0	
1403.		0	0	(
1498.	Summary of remaining write-ins for Line 14 from overflow page	0	0	(
1499.	Totals (Lines 1401 thru 1403 plus 1498)(Line 14 above)	0	0	(
2901.	Totals (2.1.00 TTO TAIL TO DIG TTO ON A	0	0	(
		0	0	
2902				
2902.		0	n	1
2902. 2903 2998.	Summary of remaining write-ins for Line 29 from overflow page	0	0	

STATEMENT OF REVENUE AND EXPENSES (Continued)

	STATEMENT OF REVENUE AND EXPENSES	Continued	,
		1 Current Year	2 Prior Year
	CAPITAL AND SURPLUS ACCOUNT		
33.	Capital and surplus prior reporting year.	1,525,231	1,517,765
34.	Net income or (loss) from Line 32	5,737	7,466
35.	Change in valuation basis of aggregate policy and claim reserves		0
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$		0
	Change in net unrealized capital gains (losses) less capital gain stax of \$ Change in net unrealized foreign exchange capital gain or (loss)		0
37.			
38.	Change in net deferred income tax		
39.	Change in nonadmitted assets		0
40	Change in unauthorized and certified reinsurance		0
41.	Change in treasury stock		0
42.	Change in surplus notes		0
43.	Cumulative effect of changes in accounting principles.	0	0
44.	Capital Changes:		
	44.1 Paid in	0	0
	44.2 Transferred from surplus (Stock Dividend)	0	0
	44.3 Transferred to surplus.	0	0
45.	Surplus adjustments:		
	45.1 Paid in		0
	45.2 Transferred to capital (Stock Dividend)	0	0
	45.3 Transferred from capital	0	0
46.	Dividends to stockholders	0	0
47.	Aggregate write-ins for gains or (losses) in surplus	0	0
48.	Net change in capital and surplus (Lines 34 to 47)	805,737	7,466
49.	Capital and surplus end of reporting period (Line 33 plus 48)	2,330,968	1,525,231
	DETAILS OF WRITE-INS		
4701.		0	0
4702.		0	0
4703.			
4798.	Summary of remaining write-ins for Line 47 from overflow page		0
4799.	Totals (Lines 4701 thru 4703 plus 4798)(Line 47 above)	0	0
1133.	Totale (Elice 1701 tille 1700 pile 1700/Lille 17 duove)		

CASH FLOW

	CASITIEOW	1	2
		Current Year	Prior Year
	Cash from Operations	Sarrein, real	
1.	Premiums collected net of reinsurance	0	0
	Net investment income		13,047
	Miscellaneous income		0
4.	Total (Lines 1 through 3)	16,833	13,047
5.	Benefit and loss related payments	(1,497)	0
	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
	Commissions, expenses paid and aggregate write-ins for deductions		
	Dividends paid to policyholders		0
9.	Federal and foreign income taxes paid (recovered) net of \$	(556)	8,402
10.	Total (Lines 5 through 9)	8,212	9,000
	Net cash from operations (Line 4 minus Line 10)		4,047
40	Cash from Investments		
	Proceeds from investments sold, matured or repaid:		2
	12.1 Bonds		0
	12.2 Stocks		0
	12.3 Mortgage loans		0
	12.4 Real estate		0
	12.5 Other invested assets		0
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		0
	12.7 Miscellaneous proceeds		0
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	0	0
	Cost of investments acquired (long-term only):		0
	13.1 Bonds		0
	13.2 Stocks		0
	13.3 Mortgage loans 13.4 Real estate		
			0
	13.5 Other invested assets		
	13.6 Miscellaneous applications		0
	13.7 Total investments acquired (Lines 13.1 to 13.6)		0
	Net increase (decrease) in contract loans and premium notes		0
15.	Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	0	0
	Cash from Financing and Miscellaneous Sources		
	Cash provided (applied):	_	
	16.1 Surplus notes, capital notes		0
	16.2 Capital and paid in surplus, less treasury stock		0
	16.3 Borrowed funds		0
	16.4 Net deposits on deposit-type contracts and other insurance liabilities		0
	16.5 Dividends to stockholders	0	0
	16.6 Other cash provided (applied)	(2,977)	8,769
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	797,023	8,769
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	805,644	12,816
19.	Cash, cash equivalents and short-term investments:		
	19.1 Beginning of year	376,422	363,606
	19.2 End of year (Line 18 plus Line 19.1)	1,182,066	376,422

Note: Supplemental disclosures of cash flow information for non-cash transactions:	

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

		<i>,</i> , , ,			7110110 0		or Boom				
		1	2	3	4	5	6 Federal Employees	7 Title	8 Title	9	10
		Total	Comprehensive (Hospital & Medical)	Medicare Supplement	Dental Only	Vision Only	Health Benefits Plan	XVIII Medicare	XIX Medicaid	Other Health	Other Non-Health
1.	Net premium income	Λ	(1103pital & Medical)	Oupplement	Offiny	Offiny	Denents Han	Niedicare	iviedicaid	n n	non-rieaith
	Change in unearned premium reserves and reserve for									V	
	rate credit	0	0	0	0	0	0	0		0 0	0
3.	Fee-for-service (net of \$0										
	medical expenses)	0	0	0	0	0	0	0		0	XXX
4.	Risk revenue	0	0	0	0	0	0	0		0	XXX
5.	Aggregate write-ins for other health care related revenues	0	0	0	0	0	Δ	0		00	xxx
6.	Aggregate write-ins for other non-health care related revenues	0	xxx	XXX	xxx	xxx	xxx	xxx	xxx	xxx	0
7.	Total revenues (Lines 1 to 6)	0	0	0	0	0	0	0		0	0
8.	Hospital/medical benefits	(1,497)	(1,497)	0	0	0	0	0		o [o [XXX
9.	Other professional services	0	0	0	0	0	0	0		o [o [XXX
10.	Outside referrals	0	0	0	0	0	0	0		0 [XXX
11.	Emergency room and out-of-area	0	0	0	0	0	0	0		0 [XXX
12.	Prescription drugs	0	0	0	0	0	0	0		0	XXX
13.	Aggregate write-ins for other hospital and medical	0	0	0	0	0	0	0		0	XXX
14.	Incentive pool, withhold adjustments and bonus amounts	0	0	0	0	0	0	0		o [o [XXX
15.	Subtotal (Lines 8 to 14)	(1,497)	(1,497)	0	0	0	0	0		o [o [XXX
16.	Net reinsurance recoveries	0	0	0	0	0	0	0		0	XXX
17.	Total medical and hospital (Lines 15 minus 16)	(1,497)	(1,497)	0	0	0	0	0		0	XXX
18.	Non-health claims (net)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
19.	Claims adjustment expenses including										
	\$0 cost containment expenses	0	0	0	0	0	0	0		0	0
20.	General administrative expenses	10.228	10,228	0	0	0	0	0		0	0
21.	Increase in reserves for accident and health contracts	0		0	0	0	0	0		0	XXX
22.	Increase in reserves for life contracts	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
23.	Total underwriting deductions (Lines 17 to 22)	8.731	8,731	0	0	0	0	0			0
24.		(8.731)	(8,731)	0	0	0	0	0		0	0
	DETAILS OF WRITE-INS	(-,:-:/	(=,:=:,	-		-		-		-	-
0501.											XXX
0502.											XXX
0503.											XXX
0598.	Summary of remaining write-ins for Line 5 from overflow page	0	0	0	0	0	0	0	,	00	xxx
0599.	Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)	0	0	0	0	0	0	0)	0	XXX
0601.			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0602.			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0603.			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0698.	Summary of remaining write-ins for Line 6 from overflow page	0	xxx	XXX	xxx	xxx	xxx	xxx	xxx	xxx	0
0699.	Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
1301.											XXX
1302.											XXX
1303.											XXX
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	^	0	0		0			XXX
1200	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		ν	ν	J	ν)	ν		0 0	XXX
1399.	Totals (Lines 1301 tillu 1303 plus 1396) (Line 13 above)	U	1 0	U	1 0	1 0	1	1 0	' I	0	^^^

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS

PART 1 - PREMIUMS				
	1	2	3	4
Line of Business	Direct Business	Reinsurance Assumed	Reinsurance Ceded	Net Premium Income (Cols. 1 + 2 - 3)
1. Comprehensive (hospital and medical)				
2. Medicare Supplement				
 3. Dental only				
3. Dental only				
4. Vision only				
5. Federal Employees Health Benefits Plan				
6. Title XVIII - Medicare				
7 Title VIV Medicald				
7. Title XIX - Medicaid				
8. Other health				
9. Health subtotal (Lines 1 through 8)				
10. Life				
11 Proporty/grouply				
11. Property/casualty				
12. Totals (Lines 9 to 11)				

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - CLAIMS INCURRED DURING THE YEAR

				IMS INCURRED DU	NING THE TEAN	1				
	1	2	3	4	5	6 Federal	7	8	9	10
						Employees	Title	Title		
		Comprehensive	Medicare			Health	XVIII	XIX		Other
	Total	(Hospital & Medical)	Supplement	Dental Only	Vision Only	Benefits Plan	Medicare	Medicaid	Other Health	Non-Health
Payments during the year:				_						
1.1 Direct	(1,497)	(1,522)	0	0	0		025	0	0	0
1.2 Reinsurance assumed	0	0	0	0	0		0	0	0	0
1.3 Reinsurance ceded	0	0	0	0	0		0	0	0	0
1.4 Net	(1,497)	(1,522)	0	0	0		0 25	0	0	0
Paid medical incentive pools and bonuses	0	0	0	0	0		0	0	0	0
3. Claim liability December 31, current year from Part 2A:										
3.1 Direct	0	0	0	0	0		0	0	0	0
3.2 Reinsurance assumed	0	0	0	0	0		0	0	0	0
3.3 Reinsurance ceded	0	0	0	0	0		0	0	0	0
3.4 Net	0	0	0	0	0		0	0	0	0
Claim reserve December 31, current year from Part 2D:							-			
4.1 Direct	0	0	0	0	0		0	0	0	0
4.2 Reinsurance assumed	0	0	0	0	0		0	0	0	0
4.3 Reinsurance ceded	0	0	0	0	0		0	0	0	0
4.4 Net	0	0	0	0	0		0	0	0	0
Accrued medical incentive pools and bonuses, current							· · · · · · · · · · · · · · · · · · ·			
year	0	0	0	0	0		0	0	0	0
Net healthcare receivables (a)	0	0	0	0	0		0	0	0	0
7. Amounts recoverable from reinsurers December 31,										
current year	0	0	0	0	0		0	0	0	0
8. Claim liability December 31, prior year from Part 2A:										
8.1 Direct	0	0	0	0	0		0	0	0	0
8.2 Reinsurance assumed	0	0	0	0	0		0	0	0	0
8.3 Reinsurance ceded	0	0	0	0	0		0	0	0	0
8.4 Net	0	0	0	0	0		0	0	0	0
9. Claim reserve December 31, prior year from Part 2D:										
9.1 Direct	0	0	0	0	0		0	0	0	0
9.2 Reinsurance assumed	0	0	0	0	0		0	0	0	0
9.3 Reinsurance ceded	0	0	0	0	0		0	0	0	0
9.4 Net	0	0	0	0	0		0	0	0	0
Accrued medical incentive pools and bonuses, prior year	r 0	0	0	0	0		0	0	0	0
11. Amounts recoverable from reinsurers December 31,		·			•			·	· ·	
prior year	0	0	0	0	0		0	0	0	0
12. Incurred Benefits:										
12.1 Direct	(1,497)	(1,522)	0	0	0		025	0	0	0
12.2 Reinsurance assumed	0	0	0	0	0		00	0	0	0
12.3 Reinsurance ceded	0	0	0	0	0		0	0	0	0
12.4 Net	(1,497)	(1,522)	0	0	0		0 25	0	0	0
13. Incurred medical incentive pools and bonuses	0	(1,022)	0	0	0		0 0	0	n	<u> </u>
10. Incurred medical incentive pools and boliuses		U	U		U	1	0	ı	U	U

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - CLAIMS LIABILITY END OF CURRENT YEAR

1 2 3 4 5 6 7 8 9 Federal Employees Title Title Comprehensive Comprehensive (Hospital & Medicare Total (Hospital & Medical) Supplement Dental Only Vision Only Benefits Plan Medicare Medicare Medicaid Other Health	10 Other Non-Health
Total (Hospital & Medical) Supplientent Dental Only Medical Medical Medical Medical Ottlet Health	I VOII-I I GAILII
1. Reported in Process of Adjustment:	
1.1 Direct	
1.2 Reinsurance assumed	
1.3 Reinsurance ceded	
1.4 Net	
2. Incurred but Unreported:	
2.1 Direct	
2.2 Reinsurance assumed	
2.3 Reinsurance ceded	
2.4 Net	
3. Amounts Withheld from Paid Claims and Capitations:	
3.1 Direct	
3.2 Reinsurance assumed	
3.3 Reinsurance ceded	
3.4 Net	
4. TOTALS:	
4.1 Direct	
4.2 Reinsurance assumed	
4.3 Reinsurance ceded	
4.4 Net	

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2B - ANALYSIS OF CLAIMS LINPAID - PRIOR YEAR - NET OF REINSURANCE

PART 2B - ANALYSIS OF CLAIMS UNPAID - PRIC	OIL ILAIL-NEI OI	REINSURANCE				
			Claim Reserve a		5	6
	Claims Paid I	During the Year	December 31	of Current Year		
	1	2	3	4		Estimated Claim
						Reserve and Claim
	On Claims Incurred		On Claims Unpaid		Claims Incurred	Liability
	Prior to January 1	On Claims Incurred	December 31 of	On Claims Incurred	In Prior Years	December 31 of
Line of Business	of Current Year	During the Year	Prior Year	During the Year	(Columns 1 + 3)	Prior Year
Comprehensive (hospital and medical)	0	(1.522)	0	0	0	0
1. Competitione (nospital and medical)		(1,022)				
O. Madisana Consistances	0	0	0	0		0
Medicare Supplement		U		0	U	U
	_	_	_	_	_	_
3. Dental Only		0	0	0	0	0
4. Vision Only	0	0	0	0	0	0
•						
5. Federal Employees Health Benefits Plan	0	0	0	0	0	0
3. Federal Employees Fleatin Deficility Flat						°
O. THE NAME AS F.	0	25	•	0	_	0
6. Title XVIII - Medicare		25	0	0	0	0
7 Title XIX - Medicaid		0	0	0	0	0
8. Other health	0	0	0	0	0	0
9. Health subtotal (Lines 1 to 8)	0	(1.497)	0	0	0	٥
3. Flediti Subiotal (Lines 1 to 0)		(1,407)				
				0		
10. Healthcare receivables (a)		0	0	0	0	0
11. Other non-health	0	0	0	0	0	0
12. Medical incentive pools and bonus amounts	0	0	0	0	0	0
13. Totals (Lines 9 - 10 + 11 + 12)	n	(1,497)	n	0	n	n
13. 10(a)3 (Lilie3 3 - 10 + 11 + 12)	U	(1,437)	U	U	U	U

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS (\$000 Omitted)

Section A - Paid Health Claims - Comprehensive (Hospital & Medical)

		•	C	Cumulative Net Amounts F	Paid	
		1	2	3	4	5
	Year in Which Losses Were Incurred	2014	2015	2016	2017	2018
1.	Prior	0		00	0	0
2.	2014	0		0	0	0
3.	2015	XXX		0	0	0
4.	2016	XXX	XXX	0	0	0
5.	2017	XXX	XXX	XXX	0	0
6.	2018	XXX	XXX	XXX	XXX	(2)

Section B - Incurred Health Claims - Comprehensive (Hospital & Medical)

	Sum of Cumulative N	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonus Outstanding at End of Year							
Year in Which Losses Were Incurred	1 2014	2 2015	3 2016	4 2017	5 2018				
	2014	2015	2016	2017	2010				
1. Prior	(3)	0	0	0	0				
2. 2014	0	0	0	0	0				
3. 2015	xxx	0	0	0	0				
4. 2016	xxx	XXX	0	0	0				
5. 2017	XXX	XXX	XXX	0	0				
6. 2018	XXX	XXX	XXX	XXX	(2)				

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Comprehensive (Hospital & Medical)

	1	2	3	4	5	6	7	8	9	10
					Claim and Claim				Total Claims and	
Years in which					Adjustment Expense			Unpaid Claims	Claims Adjustment	
Premiums were Earned and Claims			Claim Adjustment	(Col. 3/2)	Payments	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)
were Incurred	Premiums Earned	Claims Payment	Expense Payments	Percent	(Col. 2 + 3)	Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1. 2014	0	0	0	0.0	0	0.0	0	0	0	0.0
2. 2015	0	0	0	0.0	0	0.0	0	0	0	0.0
3. 2016	0	0	0	0.0	0	0.0	0	0	0	0.0
4. 2017	0	0	0	0.0	0	0.0	0	0	0	0.0
5. 2018	0	(2)	0	0.0	(2)	0.0	0	0	(2)	0.0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS (\$000 Omitted)
Section A - Paid Health Claims - Medicare Supplement

Oconom A Tura medicare outplemen	Cumulative Net Amounts Paid						
	1	2	3	4	5		
Year in Which Losses Were Incurred	2014	2015	2016	2017	2018		
1. Prior							
2. 2014							
3. 2015	XXX						
4. 2016	XXX	XXX					
5. 2017	XXX	XXX	XXX				
6. 2018	XXX	XXX	XXX	XXX			

Section B - Incurred Health Claims - Medicare Supplement

Continue incurred results of the continue incurred completions											
Sum of Cumulative Net Amount Paid and Claim Lia Outstan					ive Pool and Bonuses						
	1	2	3	4	5						
Year in Which Losses Were Incurred	2014	2015	2016	2017	2018						
1. Prior											
2. 2014											
3. 2015	XXX										
4. 2016	XXX	XXX									
5. 2017	XXX	XXX	XXX								
6. 2018	XXX	XXX	XXX	XXX							

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Medicare Supplement

	1	2	3	4	5	6	7	8	9	10
					Claim and Claim				Total Claims and	
Years in which					Adjustment Expense			Unpaid Claims	Claims Adjustment	
Premiums were Earned and Claims			Claim Adjustment	(Col. 2/2)	Payments	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)
were Incurred	Premiums Earned	Claims Payment	ense	Perc	<u> </u>	Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1. 2014										
2. 2015										
					·					
3. 2016				<i></i>					+	
4. 2017										
5. 2018										

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS (\$000 Omitted)

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Aetna Health Inc. (a Michigan corporation)

Section A - Paid Health Claims - Dental Only

	Cumulative Net Amounts Paid						
	1	2	3	4	5		
Year in Which Losses Were Incurred	2014	2015	2016	2017	2018		
1. Prior							
2. 2014							
3. 2015	XXX						
4. 2016	XXX	XXX					
5. 2017	XXX	XXX	XXX				
6. 2018	XXX	XXX	XXX	XXX			

Section B - Incurred Health Claims - Dental Only

	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool ar Outstanding at End of Year						
Year in Which Losses Were Incurred	1 2014	2 2015	3 2016	4 2017	5 2018		
1. Prior							
2. 2014 3. 2015	XXX						
3. 2015 4. 2016	XXX	XXX					
5. 2017	XXX	XXX	XXX				
6. 2018	XXX	XXX	XXX	XXX			

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Dental Only

		1	2	3	4	5	6	7	8	9	10
						Claim and Claim				Total Claims and Claims Adjustment	
	Years in which					Adjustment Expense			Unpaid Claims	Claims Adjustment	
	Premiums were Earned and Claims			Claim Adjustment	(Col. 2/2)	Payments	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)
	were Incurred	Premiums Earned	Claims Payment	ense	Perc	<u> </u>	Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1.	2014										
2	2015										
2.						· · · · · · · · · · · · · · · · · · ·				†	
3.	2016			+	·····	<u>-</u>				ļJ	†
4.	2017									<u> </u>	
5.	2018										

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS (\$000 Omitted)

Section A - Paid Health Claims - Vision Only

Coolon A Tura Houran Granic Victori Giny	Cumulative Net Amounts Paid							
	1	2	3	4	5			
Year in Which Losses Were Incurred	2014	2015	2016	2017	2018			
1. Prior								
2. 2014								
3. 2015	xxx							
4. 2016	xxx	XXX						
5. 2017	xxx	XXX	XXX					
6. 2018	XXX	XXX	XXX	XXX				

Section B - Incurred Health Claims - Vision Only

Cocarin B mount of notice that the state of								
	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year							
	1	2	3	4	5			
Year in Which Losses Were Incurred	2014	2015	2016	2017	2018			
1. Prior								
2. 2014								
3. 2015	XXX							
4. 2016	XXX	XXX						
5. 2017	XXX	XXX	XXX					
6. 2018	XXX	XXX	XXX	XXX	,			

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Vision Only

		1	2	3	4	5	6	7	8	9	10
						Claim and Claim				Total Claims and	
	Years in which					Adjustment Expense			Unpaid Claims	Claims Adjustment	
	Premiums were Earned and Claims			Claim Adjustment	(Col. 2/2)	Payments	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)
	were Incurred	Premiums Earned	Claims Payment	ense ymer	Perc	<u>_</u> . • • /	Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1	. 2014										
2	. 2015										
						· · · · · · · · · · · · · · · · · · ·					
3	. 2016					<u></u>				 	t
4	. 2017										
5	. 2018				_						

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS (\$000 Omitted)

Section A - Paid Health Claims - Federal Employees Health Benefits Plan Premium

	Cumulative Net Amounts Paid						
	1	2	3	4	5		
Year in Which Losses Were Incurred	2014	2015	2016	2017	2018		
1. Prior							
2. 2014							
3. 2015	xxx						
4. 2016	XXX	XXX					
5. 2017	XXX	XXX	XXX				
6. 2018	XXX	XXX	XXX	XXX			

Section B - Incurred Health Claims - Federal Employees Health Benefits Plan Premium

Occion D' mourreu ricultir cialing i reactur Employees ricultir Benefit								
	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Po Outstanding at End of Year							
	1	2	3	4	5			
Year in Which Losses Were Incurred	2014	2015	2016	2017	2018			
1. Prior								
2. 2014								
3. 2015	XXX							
4. 2016	XXX	XXX						
5. 2017	XXX	XXX	XXX					
6. 2018	XXX	XXX	XXX	XXX				

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Federal Employees Health Benefits Plan Premium

		1	2	3	4	5	6	7	8	9	10
						Claim and Claim				Total Claims and	•
	Years in which					Adjustment Expense			Unpaid Claims	Claims Adjustment	
	Premiums were Earned and Claims			Claim Adjustment	(Col. 2/2)	Paymonts	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)
	were Incurred	Premiums Earned	Claims Payment	ense	Perc	·· = · •/	Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1.	2014										
2.	2015										
3.	2016										
4.	2017										
5	2018					T					•

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS (\$000 Omitted)

Section A - Paid Health Claims - Title XVIII

Cumulative Net Amounts Paid					
	1	2	3	4	5
Year in Which Losses Were Incurred	2014	2015	2016	2017	2018
1. Prior					
2. 2014					
3. 2015	XXX				
4. 2016	XXX	XXX			
5. 2017	XXX	XXX	XXX		
6. 2018	XXX	XXX	XXX	XXX	

Section B - Incurred Health Claims - Title XVIII

Couldn't incurred ricatin claims Title X							
	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pol Outstanding at End of Year						
	1	2	3	4	5		
Year in Which Losses Were Incurred	2014	2015	2016	2017	2018		
1. Prior							
2. 2014							
3. 2015	XXX						
4. 2016	XXX	XXX					
5. 2017	XXX	XXX	XXX	-			
6. 2018	XXX	XXX	XXX	XXX			

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Title XVIII

	1	2	3	4	5	6	7	8	9	10
					Claim and Claim				Total Claims and	
Years in which					Adjustment Expense			Unpaid Claims	Claims Adjustment	
Premiums were Earned and Claims			Claim Adjustment	(Col. 2/2)	Payments	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)
were Incurred	Premiums Earned	Claims Payment	ense ymer	Perc	∠ · <i>⊙</i> /	Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1. 2014										
2. 2015										
					· · · · · · · · · · · · · · · · · · ·				†	
3. 2016				· <i>A J</i> · · · · · · · · · · · · · · · · · ·	<u></u>					
4. 2017										
5. 2018				-						

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS (\$000 Omitted)

Section A - Paid Health Claims - Title XIX

	Cumulative Net Amounts Paid						
	1	2	3	4	5		
Year in Which Losses Were Incurred	2014	2015	2016	2017	2018		
1. Prior							
2. 2014							
3. 2015	XXX						
4. 2016	XXX	XXX					
5. 2017	XXX	XXX	XXX				
6. 2018	XXX	XXX	XXX	XXX			

Section B - Incurred Health Claims - Title XIX

	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool Outstanding at End of Year							
	1	2	3	4	5			
Year in Which Losses Were Incurred	2014	2015	2016	2017	2018			
1. Prior								
2. 2014								
3. 2015	xxx							
4. 2016	XXX	XXX						
5. 2017	XXX	XXX	XXX					
6. 2018	xxx	XXX	XXX	XXX				

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Title XIX

	1	2	3	4	5	6	7	8	9	10
					Claim and Claim				Total Claims and	
Years in which					Adjustment Expense			Unpaid Claims	Claims Adjustment	
Premiums were Earned and Claims			Claim Adjustment	(Col. 2/2)	Paymonte	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1) Percent
were Incurred	Premiums Earned	Claims Payment	ense	Perc	 ∟ + ⊙,	Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1. 2014										
2. 2015										
3. 2016									T	
4. 2017										
5. 2018										

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted) Section A - Paid Health Claims - Other

	Cumulative Net Amounts Paid						
	1	2	3	4	5		
Year in Which Losses Were Incurred	2014	2015	2016	2017	2018		
1. Prior							
2. 2014							
3. 2015	XXX						
4. 2016	XXX	XXX					
5. 2017	XXX	XXX	XXX				
6. 2018	XXX	XXX	XXX	XXX			

Section B - Incurred Health Claims - Other

	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonu Outstanding at End of Year							
Year in Which Losses Were Incurred	1 2 3 4							
	2014	2015	2016	2017	2018			
1. Prior								
2. 2014								
3. 2015	XXX							
4. 2016	XXX	XXX						
5. 2017	XXX	XXX	XXX					
6. 2018	XXX	XXX	XXX	XXX				

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Other

		1	2	3	4	5	6	7	8	9	10
						Claim and Claim				Total Claims and	1
	Years in which					Adjustment Expense			Unpaid Claims	Claims Adjustment	į l
	Premiums were Earned and Claims			Claim Adjustment	(Col. 2/2)	Payments	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)
	were Incurred	Premiums Earned	Claims Payment	ense ymer	Perc	<u>_</u>	Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1	2014										
2	2015										
۷.											[
3.	2016				47						
4.	2017				<i></i>						4
5.	2018										

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS (\$000 Omitted)

Section A - Paid Health Claims - Grand Total

		Cu	mulative Net Amounts F	Paid	
	1	2	3	4	5
Year in Which Losses Were Incurred	2014	2015	2016	2017	2018
1. Prior	0	0	0	0	0
2. 2014	0	0	0	0	0
3. 2015	XXX	0	0	0	0
4. 2016	XXX	XXX	0	0	0
5. 2017	XXX	XXX	XXX	0	0
6. 2018	XXX	XXX	XXX	XXX	(2)

Section B - Incurred Health Claims - Grand Total

	Sum of Cumulative N	et Amount Paid and Clai Ou	m Liability, Claim Rese tstanding at End of Ye	erve and Medical Incent ar	ve Pool and Bonuses
Year in Which Losses Were Incurred	1 2014	2 2015	3 2016	4 2017	5 2018
	2014	2013	2010	2017	2010
1. Prior	(3)	ļ0 ļ.	0	0	0
2. 2014	0	0	0	0	0
3. 2015	XXX	0	0	0	0
4. 2016	XXX	XXX	0	0	0
5. 2017	XXX	XXX	XXX	0	0
6. 2018	XXX	XXX	XXX	XXX	(2)

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Grand Total

		1	2	3	4	5	6	7	8	9	10	
						Claim and Claim				Total Claims and		
	Years in which					Adjustment Expense			Unpaid Claims	Claims Adjustment		
	Premiums were Earned and Claims			Claim Adjustment	(Col. 3/2)	Payments	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)	
	were Incurred	Premiums Earned	Claims Payment	Expense Payments	Percent	(Col. 2 + 3)	Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent	
1.	2014	0	0	0	0.0	0	0.0	0	0	0	0.0	
2.	2015	0	0	0	0.0	0	0.0	0	0	0	0.0	
3.	2016	0	0	0	0.0	0	0.0	0	0	0	0.0	
4.	2017	0	0	0	0.0	0	0.0	0	0	0	0.0	
5.	2018	0	(2)	0	0.0	(2)	0.0	0	0	(2)	0.0	

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2D - AGGREGATE RESERVE FOR ACCIDENT AND HEALTH CONTRACTS ONLY Federal **Employees** Title Title Comprehensive Health XVIII XIX (Hospital & Medical) Benefits Plan Total Supplement Dental Only Vision Only Medicare Medicaid Other 1. Unearned premium reserves 2. Additional policy reserves (a) .. 3. Reserve for future contingent benefits 4. Reserve for rate credits or experience rating refunds (including \$) for investment income ... 5. Aggregate write-ins for other policy reserves ... 6. Totals (gross) 7. Reinsurance ceded 8. Totals (Net)(Page 3, Line 4) 9. Present value of amounts not yet due on claims 10. Reserve for future contingent benefits . 11. Aggregate write-ins for other claim reserves 12. Totals (gross) ... 13. Reinsurance ceded 14. Totals (Net)(Page 3, Line 7) DETAILS OF WRITE-INS 0501. 0502. 0503. 0598. Summary of remaining write-ins for Line 5 from overflow page... 0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above) 1101.

1199.	Totals	s (Lines 1101 thru	ı 1103 p	lus 1198)	(Line 11 a	above)
(a) Includ	des \$			premium	deficiency	reserve.

1198. Summary of remaining write-ins for Line 11 from overflow page

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - ANALYSIS OF EXPENSES

		Claim Adjustm	.YSIS OF EXPENSI	3	4	5
		1 Cost Containment	2 Other Claim Adjustment	General Administrative	Investment	3
		Expenses	Expenses	Expenses	Expenses	Total
1.	Rent (\$0 for occupancy of					
	own building)	0	0	0	0	0
2.	Salary, wages and other benefits	0	0	0	0	0
3.	Commissions (less \$0					
	ceded plus \$0 assumed)	0	0	0	0	0
4.	Legal fees and expenses	0	0	0	0	0
5.	Certifications and accreditation fees	0	0	0	0	0
6.	Auditing, actuarial and other consulting services	0	0	0	0	0
7.	Traveling expenses	0	0	0	0	0
8.	Marketing and advertising	0	0	0	0	0
9.	Postage, express and telephone	0	0	0	0	0
10.	Printing and office supplies	0	0	0	0	0
11.	Occupancy, depreciation and amortization	0	0	0	0	0
12.	Equipment	0	0	0	0	0
13.	Cost or depreciation of EDP equipment and software		0			
		0	0		0	0
14.	Outsourced services including EDP, claims, and other services	0	0	0	0	0
15.	Boards, bureaus and association fees	0	0	0	0	0
16.	Insurance, except on real estate	0	0	0	0	0
17.	Collection and bank service charges	0	0	0	0	0
18.	Group service and administration fees	0	0	0	0	0
19.	Reimbursements by uninsured plans	0	0	0	0	0
20.	Reimbursements from fiscal intermediaries	0	0	0	0	0
21.	Real estate expenses	0	0	0	0	0
22.	Real estate taxes	0	0	0	0	0
23.	Taxes, licenses and fees:					
	23.1 State and local insurance taxes	0	0	(37)	0	(37)
	23.2 State premium taxes	0	0	0	0	0
	23.3 Regulatory authority licenses and fees	0	0	10,012	0	10,012
	23.4 Payroll taxes	0	0	0	0	0
	23.5 Other (excluding federal income and real estate taxes)	0	0	235	0	235
24.	Investment expenses not included elsewhere	0	0	0	0	0
25.	Aggregate write-ins for expenses	0	0	18	0	18
26.	Total expenses incurred (Lines 1 to 25)	0	0	10,228	0	(a)10,228
27.	Less expenses unpaid December 31, current year.	0	0	93	0	93
28.	Add expenses unpaid December 31, prior year	0	0	130	0	130
29.	Amounts receivable relating to uninsured plans, prior year	0	0	0	0	0
30.	Amounts receivable relating to uninsured plans, current year	0	0	0	0	0
31.	Total expenses paid (Lines 26 minus 27 plus 28 minus 29 plus 30)	0	0	10,265	0	10,265
	DETAILS OF WRITE-INS					
2501.	Miscellaneous	0	0	18	0	18
2502.						ļ
2503.						
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0	0
2599.	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above) des management fees of \$0	0 to affiliates and \$	0	n-affiliates.	0	18
	des management fees of \$ 0	io anniaies and \$	u to no	m-anniares		

(a) Includes management fees of \$ _____0 to affiliates and \$ _____0 to non-affiliates.

EXHIBIT OF NET INVESTMENT INCOME

	1	2
	·	r Earned During Year
1.	U.S. government bonds	
1.1	Bonds exempt from U.S. tax	
1.2	Other bonds (unaffiliated) (a)	
1.3	Bonds of affiliates	
2.1	Preferred stocks (unaffiliated) (b)	
2.11	Preferred stocks of affiliates	
2.2	Common stocks (unaffiliated) 0	
2.21	Common stocks of affiliates 0	
3.	Mortgage loans (c) 0	0
4.	Real estate (d) 0	
5	Contract Loans 0	
6	Cash, cash equivalents and short-term investments (e) 6,770	
7	Derivative instruments (f) 0	0
8.	Other invested assets 0	
9.	Aggregate write-ins for investment income0	0
10.	Total gross investment income 15,988	15,993
11.	Investment expenses	(g)0
12.	Investment taxes, licenses and fees, excluding federal income taxes	(g)0
13.	Interest expense	
14.	Depreciation on real estate and other invested assets	(i)0
15.	Aggregate write-ins for deductions from investment income	
16.	Total deductions (Lines 11 through 15)	0
17.	Net investment income (Line 10 minus Line 16)	15,993
	DETAILS OF WRITE-INS	
0901.		
0902.		
0903.		
0998.	Summary of remaining write-ins for Line 9 from overflow page0	
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	0
1501.		
1502.		
1503.		
1598.	, , ,	
1599.	Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above)	0
(a) Inclu	ides \$	iterest on purchases.
	ides \$	•
	Ides \$	·
		iterest on purchases.
	ides \$	
	ides \$	iterest on purchases.
(f) Inclu	des \$	
(g) Incluseg	investment expenses and \$	tributable to

EXHIBIT OF CAPITAL GAINS (LOSSES)

 $(h) \ Includes \$ \qquad \qquad 0 \quad interest \ on \ surplus \ notes \ and \$ \qquad \qquad 0 \quad interest \ on \ capital \ notes.$

(i) Includes \$ _____0 depreciation on real estate and \$ _____0 depreciation on other invested assets.

		OI CAPI	IAL GAIN	3 (LU33L	.J	
		1	2	3	4	5
				Total Realized Capital	Change in	Change in Unrealized
		Realized Gain (Loss)	Other Realized	Gain (Loss)	Unrealized Capital	Foreign Exchange
		On Sales or Maturity	Adjustments	(Columns 1 + 2)	Gain (Loss)	Capital Gain (Loss)
1.	U.S. Government bonds					
1.1	Bonds exempt from U.S. tax					
1.2	Other bonds (unaffiliated)					
1.3	Bonds of affiliates					
2.1	Preferred stocks (unaffiliated)					
2.11	Preferred stocks of affiliates					
2.2	Common stocks (unaffiliated)					
2.21	Common stocks of affiliates					
3.	Mortgage loans					
4.	Real estate					
5.	Contract loans					
6.	Cash, cash equivalents and short-term investment		<i></i>			
7.	Derivative instruments					
8.	Other invested assets					
9.	Aggregate write-ins for capital gains (losses)	-				
10.	Total capital gains (losses)					
	DETAILS OF WRITE-INS					
0901.						
0902.						
0903.						
0998.	Summary of remaining write-ins for Line 9 from overflow page					
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)					

Exhibit of Nonadmitted Assets

NONE

Exhibit 1 - Enrollment by Product Type for Health Business Only ${f N} \ {f O} \ {f N} \ {f E}$

NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying statutory financial statements of Aetna Health Inc. (a Michigan corporation) (the "Company"), indirectly a wholly-owned subsidiary of CVS Health Corporation ("CVS Health"), have been prepared in conformity with accounting practices prescribed or permitted by the Michigan Department of Insurance and Financial Services ("Michigan Department") ("Michigan Accounting Practices"). The Michigan Department recognizes only statutory accounting practices prescribed or permitted by the State of Michigan for determining and reporting the financial condition and results of operations of an insurance company, which include accounting practices and procedures adopted by the National Association of Insurance Commissioners' ("NAIC") Accounting Practices and Procedures Manual ("NAIC SAP"). On November 28, 2018, CVS Health acquired Aetna Inc. ("Aetna") and at that date became the Company's ultimate parent (the "Aetna Acquisition").

A reconciliation of the Company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the State of Michigan for the years ending December 31, 2018 and 2017 is as follows:

		SSAP#	F/S Page	F/S Line #	2018	2017
NET I	NCOME					
(1)	State basis (Page 4, Line 32, Columns 2 & 3)	XXX	XXX	XXX	\$5,737	\$7,466
(2)	State Prescribed Practices that increase/(decrease) NAIC SAP:				_	_
	None					
(3)	State Permitted Practices that increase/(decrease) NAIC SAP: None				_	_
(4)	NAIC SAP (1-2-3=4)	XXX	XXX	XXX	5,737	7,466
SURP	PLUS					
(5)	State basis (Page 3, Line 33, Columns 3 & 4)	xxx	XXX	XXX	2,330,968	1,525,231
(6)	State Prescribed Practices that increase/(decrease) NAIC SAP:					
	None				_	_
(7)	State Permitted Practices that increase/(decrease) NAIC SAP:					
	None				-	_
(8)	NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$2,330,968	\$1,525,231

B. <u>Use of Estimates in the Preparation of the Financial Statements</u>

The preparation of these financial statements in conformity with Michigan Accounting Practices requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and revenue and expenses. Actual results could differ from those estimates.

C. Accounting Policies

The Company applies the following significant accounting policies:

(1) Cash, Cash Equivalents and Short-Term Investments

Cash, cash equivalents and short-term investments, consisting primarily of money market instruments and other debt issues with an original maturity of up to one year, are carried at amortized cost. Short-term investments consist primarily of investments purchased with an original maturity date of greater than three months but less than one year. Cash equivalents consist of highly liquid instruments, which mature within three months from the date of purchase. The carrying amount of cash, cash equivalents and short-term investments approximates fair value. Cash accounts with positive balances shall not be reported separately from cash accounts with negative balances. If in the aggregate, the reporting entity has a net negative cash balance, it shall be reported as a negative asset and shall not be recorded as a liability.

(2) Bonds

Bonds, which include special deposits, are carried at amortized cost except for those bonds with an NAIC designation of 3 through 6, which are carried at the lower of amortized cost or fair value. The amount carried at fair value is not material to the financial statements. Bond premiums and discounts are amortized using the scientific interest method. When quoted prices in active markets for identical assets are available, the Company uses these quoted market prices to determine the

fair value of bonds. This is used primarily for U.S. government securities. In other cases where a quoted market price for identical assets in an active market is either not available or not observable, the Company estimates fair values using valuation methodologies based on available and observable market information or by using a matrix pricing model. If quoted market prices are not available, the Company determines fair value using broker quotes or an internal analysis of each investment's financial performance and cash flow projections. The Company had no investments where fair value was determined using broker quotes or an internal analysis of financial performance and cash flow projections at December 31, 2018 and 2017. Bonds include all investments whose maturity is greater than one year when purchased. Loan-backed and structured securities are carried at amortized cost adjusted for unamortized premiums and discounts. Premiums and discounts on loan-backed and structured securities are amortized using the interest method over the estimated remaining term of the securities, adjusted for anticipated prepayments. All adjustments between amortized cost and carrying value are reflected in unrealized capital gains and losses and are reported as direct adjustments to surplus. Bonds are recorded as purchases or sales on the trade date.

The Company periodically reviews its bonds to determine whether a decline in fair value below the carrying value is other-than-temporary. For bonds, other than loan-backed and structured securities, an other-than-temporary impairment ("OTTI") shall be recorded if it is probable that the Company will be unable to collect all amounts due according to the contractual terms in effect at the date of acquisition. Declines deemed to be OTTI in the cost basis are recognized as realized capital losses. Yield-related impairments are deemed other-than-temporary when the Company intends to sell an investment at the reporting date before recovery of the cost of the investment.

For loan-backed and structured securities, the Company records OTTI when the fair value of the loan-backed or structured security is less than the amortized cost basis at the balance sheet date and (1) the Company intends to sell the investment, or (2) the Company does not have the intent and ability to retain the investment for the time sufficient to recover the amortized cost basis, or (3) the Company does not expect to recover the entire amortized cost basis of the security, even if it does not intend to sell the security and has the intent and ability to hold. If it is determined an OTTI has occurred because of (1) or (2), the amount of the OTTI is equal to the difference between the amortized cost and the fair value of the security at the balance sheet date and this difference is recorded as a realized capital loss. If it is determined an OTTI has occurred because of (3), the amount of the OTTI is equal to the difference between the amortized cost and the present value of cash flows expected to be collected, discounted at the loan-backed or structured security's effective interest rate and this difference is also accounted for as a realized capital loss.

The Company analyzes all relevant facts and circumstances for each investment when performing its analysis to determine whether an OTTI exists. Among the factors considered in evaluating whether a decline is other-than-temporary, management considers whether the decline in fair value results from a change in the quality of the investment security itself, whether the decline results from a downward movement in the market as a whole, the prospects for realizing the carrying value of the bond based on the investee's current and short-term prospects for recovery and other factors. The risks inherent in assessing the impairment of an investment include the risk that market factors may differ from the Company's expectations and the risk that facts and circumstances factored into its assessment may change with the passage of time. Unexpected changes to market factors and circumstances that were not present in past reporting periods may result in a current period decision to sell securities that were not other-than-temporarily-impaired in prior reporting periods.

- (3) The Company did not own any common stock at December 31, 2018 or 2017.
- (4) The Company did not own any preferred stock at December 31, 2018 or 2017.
- (5) The Company did not have any mortgage loans at December 31, 2018 or 2017.
- (6) The Company did not have any loaned securities at December 31, 2018 and 2017.
- (7) The Company did not have any investments in subsidiaries, controlled or affiliated companies at December 31, 2018 or 2017.
- (8) The Company did not have any investments in any joint ventures, partnerships and limited liability companies at December 31, 2018 or 2017.
- (9) The Company did not have any derivatives at December 31, 2018 or 2017.
- (10) Aggregate Health Policy Reserves and Related Expenses

Premium deficiency reserves ("PDR") are recognized when it is probable that the expected future hospital and medical costs, including maintenance costs, will exceed anticipated future premiums and reinsurance recoveries on existing contracts. Where allowed, anticipated investment income is considered in the calculation of any PDR. For purposes of calculating a PDR, contracts are grouped in a manner consistent with the method of acquiring, servicing and measuring the profitability of such contracts. The Company had no PDR at December 31, 2018 and 2017

Unearned premium reserves ("UEP") are recognized for premiums that are recorded by the Company that have not been earned as of the statement date. The Company had no UEP at December 31, 2018 and 2017, respectively.

(11) Hospital and Medical Costs and Claims Adjustment Expenses and Related Reserves

Hospital and medical costs consist principally of fee-for-service medical claims and capitation costs. Claims unpaid and aggregate health claim reserves include the Company's estimate of payments to be made on claims reported but not yet paid and for health care services rendered to enrollees but not yet reported to the Company as of the Statutory Statements of Assets and Liabilities, Capital and Surplus date. Such estimates are developed using actuarial principles and assumptions, which consider, among other things, historical and projected claim submission and processing payment patterns, medical cost trends, historical utilization of health care services, claim inventory levels, medical inflation, contract requirement changes in membership and product mix, seasonality and other relevant factors. The Company reflects changes in estimates in hospital and medical costs in the Statutory Statements of Revenue and Expenses in the period they are determined. Capitation costs, which are recorded in hospital and medical expenses in the Statutory Statements of Revenue and Expenses, represent contractual monthly fees paid to participating physicians and other medical providers for providing medical care, regardless of the medical services provided to the enrollee.

The Company uses the triangulation method to estimate reserves for claims incurred but not reported. The method of triangulation makes estimates of completion factors that are then applied to the total paid claims (net of coordination of benefits) to date for each incurral month. This provides an estimate of the total projected incurred claims and total amount outstanding or claims incurred but not reported (claims unpaid). For the most current dates of service where there is insufficient paid claim data to rely solely on the triangulation method, the Company examines cost and utilization trends as well as environmental factors, plan changes, provider contracts, changes in membership and/or benefits, and historical seasonal patterns to estimate the reserve required for these months.

Claims adjustment expenses, which include cost containment expenses, represent the costs incurred related to the claim settlement process such as costs to record, process and adjust claims. These expenses are included in the Company's management agreement with an affiliate described in Note 10.

As explained more fully in Note 4, the Company has withdrawn from the market effective December 31, 2007.

- (12) As a result of CVS Health's acquisition of Aetna Inc. ("Aetna"), Aetna modified its capitalization policy from the prior period related to furniture and equipment ("F&E") and prepaid assets. Under the revised policy, F&E will be capitalized if greater than \$1,000 versus the previous threshold of \$500. Under the new policy, prepaid assets will be capitalized if greater than \$250,000 versus the previous threshold of \$50,000. These revisions are not expected to have a material impact on the financial results of Aetna or its affiliates, including the Company.
- (13) The Company did not have any pharmaceutical rebates receivables at December 31, 2018 or 2017.

(14) Premiums and Amounts Due and Unpaid

Premium revenue for prepaid health or dental care products is recognized as income in the month in which enrollees are entitled to health or dental care services. Premiums collected before the effective period are reported as premiums received in advance. Premiums related to unexpired contractual coverage periods are reported as unearned premiums in the Statutory Statements of Liabilities, Capital and Surplus (refer to discussion of aggregate health policy reserves and related expenses above).

Nonadmitted amounts consist of all premiums due and unpaid greater than 90 days past due, with the exception of amounts due under government insured plans, which may be admitted assets under certain circumstances. In addition, for any customer for which the premiums due and unpaid greater than 90 days past due is more than a de minimus portion of the entire balance of premiums due and unpaid for that customer, the entire balance of premiums due and unpaid for that customer is nonadmitted. Management also performs a specific review of accounts and based on the results of the review, additional amounts may be nonadmitted. Uncollectible amounts are generally written-off and charged to revenue in the period in which the customer reconciliations are completed and agreed to by the customer (retroactivity) or when the account is determined to be uncollectible by the Company.

The Company did not have any premiums or amounts due and unpaid at December 31, 2018 or 2017.

(15) Aggregate Health Claim Reserves

The reserve for future contingent benefits includes the estimated cost of services that will continue to be incurred after the Statutory Statements of Liabilities, Capital and Surplus date if the Company is obligated to pay for such services in accordance with contract provisions or regulatory requirements. These balances are recorded in aggregate health claim reserves in the Statutory Statements of Liabilities, Capital and Surplus and are estimated using a percentage of current hospital and medical costs, which is based on the Company's historical cost experience.

(16) Investment Income Due and Accrued

Accrued investment income consists primarily of interest. Interest is recognized on an accrual basis and dividends are recorded as earned on the ex-dividend date. Due and accrued income is not recorded on: (a) bonds in default; and (b) bonds delinquent more than 90 days or where collection of interest is improbable. At December 31, 2018 and 2017, the Company did not have any nonadmitted investment income due and accrued.

(17) Covered and Uncovered Expenses and Related Liabilities

Covered expenses and related liabilities represent costs for health care expenses for which a member is not responsible in the event of the insolvency of the Company. Uncovered expenses and related liabilities represent costs to the Company for health care services that are the obligation of the Company and for which a member may also be liable in the event of the Company's insolvency.

(18) Fees Paid to the Federal Government by Health Insurers

SSAP No. 106 - Affordable Care Act Section 9010 Assessment ("SSAP No. 106") required (1) that the health insurer fee be recognized in full on January 1 of the fee year (the calendar year in which the assessment must be paid to the federal government), in the operating expense category of insurance taxes, licenses and fees, excluding federal income taxes and (2) that in each data year preceding a fee year a reporting entity pro-ratably accrue by reclassifying from unassigned funds (surplus) to aggregate write-ins for special surplus funds an amount equal to its estimated subsequent fee year assessment. This reclassification has no impact on total capital and surplus and is reversed in full on January 1 of the fee year. On January 22, 2018, Public Law No: 115-120 was signed into law and it imposes a moratorium on the health insurer fee for calendar year 2019. As interpreted in INT 18-02: ACA Section 9010 Assessment Moratoriums, because there is not an ACA Section 9010 fee due in September 2019, there is not an accrual of a liability on January 1, 2019 based on 2018 data year net written premiums. Accrual of a liability on January 1, 2020 for the ACA Section 9010 assessment based on 2019 data year net written premiums and the reclassification from unassigned funds (surplus) to aggregate write-ins for special surplus funds equal to the estimated 2020 fee year assessment accrued in data year 2019 will both continue as prescribed under SSAP No. 106. See Note 22 for disclosure of all amounts related to the health insurer fee for the Company.

(19) The Patient Protection and Affordable Care Act and the Health Care and Education Reconciliation Act of 2010's (collectively, "Health Care Reform") Risk Adjustment

Reinsurance

Health Care Reform established a temporary reinsurance program that expired at the end of 2016. Under this program, all issuers of major medical commercial insurance products and self-insured plan sponsors are required to contribute funding in amounts set by the U.S. Department of Health and Human Services ("HHS"). A portion of the funds collected will be utilized to reimburse issuers' high claims costs incurred for qualified individual members. The expense related to this required funding is reflected in insurance, taxes, licenses and fees for all of the Company's insurance products with the exception of products associated with qualified individual members; this expense for qualified individual members is reflected as a reduction of premium revenue. When annual claim costs incurred by the Company's qualified individual members exceed a specified attachment point, the Company is entitled to certain reimbursements from this program. The Company records amounts recoverable for claims paid and unpaid and ceded claim benefit recoveries to reflect its estimate of these recoveries.

Risk Adjustment

Health Care Reform established a permanent risk adjustment program to transfer funds from qualified individual and small group insurance plans with below average risk scores to plans with above average risk scores. Based on the risk of the Company's qualified plan members relative to the average risk of members of other qualified plans in comparable markets, the Company estimates its ultimate risk adjustment receivable or payable for the current calendar year and reflects the impact as an adjustment to its premium revenue.

Risk Corridor

Health Care Reform established a temporary risk sharing program, which expired at the end of 2016, for qualified individual and small group insurance plans. Under this program the Company makes (or receives) a payment to (or from) HHS based on the ratio of allowable costs to target costs (as defined by Health Care Reform). The Company records a risk corridor receivable or payable as an adjustment to premium revenue based on the Company's estimate of the ultimate risk sharing amount for the current calendar year. In October 2015, HHS announced that 2014 Health Care Reform risk corridor receivables would be funded at 12.6% to the extent HHS fully collects risk corridor payables. In November 2015, INT 15-01 was issued as guidance to address the accounting for risk corridor receivables. In conjunction with this guidance, the Company recorded a risk corridor receivable that coincides with the portion of the 2014 Health Care Reform risk corridor receivables that are considered collectible. The Company did not record any risk corridor receivables for the 2017 and 2016 program years or any amount in excess of HHS' announced pro-rated funding amount for the 2014 program year because payments from HHS are uncertain.

The Company expects to perform an annual final reconciliation and settlement with HHS of the 3Rs in each subsequent year. See Note 24.E. for disclosure of amounts related to the 3Rs for the Company for the periods ending December 31, 2018 and 2017.

(20) Federal and State Income and Premium Taxes

The Company was included in the consolidated federal income tax return of its parent company, Aetna and Aetna's other wholly-owned subsidiaries through November 27, 2018 pursuant to the terms of a tax sharing agreement. For the tax period ending December 31, 2018, Aetna and its wholly-owned subsidiaries are included in the consolidated federal income tax return of its parent, CVS Health, pursuant to the terms of a tax sharing agreement (and a Supplemental Tax Sharing Agreement where applicable) between CVS Health and the Company. In accordance with both agreements, the Company's current federal and state income tax provisions are generally computed as if the Company were filing a separate federal and state income tax return; current income tax benefits, including those resulting from net operating losses, are recognized to the extent realized in the consolidated return. Pursuant to these agreements, the Company has the enforceable right to recoup federal and state income taxes paid in prior years in the event of future net losses, which it may incur, or to recoup its net losses carried forward as an offset to future net income subject to federal and state income taxes.

Income taxes are accounted for under the asset and liability method. Deferred income tax assets ("DTAs") and liabilities ("DTLs") represent the expected future tax consequences of temporary differences generated by statutory accounting as defined in SSAP No. 101 - Income Taxes. DTAs and DTLs are measured using enacted tax rates expected to apply to taxable income in the years in which those temporary differences are expected to be recovered or settled. DTAs and DTLs are computed by means of identifying temporary differences which are measured using a balance sheet approach whereby statutory and tax basis balance sheets are compared. Current income tax recoverables include all current income taxes, including interest, reasonably expected to be recovered in a subsequent accounting period.

Pursuant to SSAP No. 101, gross DTAs are first reduced by a statutory valuation allowance adjustment to an amount that is more likely than not to be realized ("adjusted gross DTAs"). Adjusted gross DTAs are then admitted in an amount equal to the sum of paragraphs a. b. and c. below:

- a. Federal income taxes paid in prior years that can be recovered through loss carrybacks for existing temporary differences that reverse during a timeframe corresponding with Internal Revenue Service ("IRS") tax loss carryback provisions.
- b. The amount of adjusted gross DTAs, after the application of paragraph a. above, expected to be realized within the applicable period and that is no greater than the applicable percentage as determined using the applicable Realization Threshold Limitation Table. The applicable period refers to the number of years in which the DTA will reverse in the Company's tax return and the applicable percentage refers to the percentage of the Company's statutory capital and surplus as required to be shown on the statutory balance sheet adjusted to exclude any net DTAs, electronic data processing equipment and operating system software and any net positive goodwill ("Stat Cap ExDTA").

The Realization Threshold Limitation Tables allow DTAs to be admitted based upon either realization within 3 years and 15% of Stat Cap ExDTA, 1 year and 10% of Stat Cap ExDTA, or no DTA admitted pursuant to this paragraph b. In general, the Realization Threshold Limitation Tables allow the Company to admit more DTAs if total DTAs as reported by the Company are a smaller percentage of statutory capital and surplus.

c. The amount of gross DTAs, after the application of paragraphs a. and b. above that can be offset against existing gross DTLs. In applying this offset, the Company considers the character (i.e. ordinary versus capital) of the DTAs and DTLs such that offsetting would be permitted in the tax return under existing enacted federal income tax laws and regulations and the reversal patterns of temporary differences.

Changes in DTAs and DTLs are recognized as a separate component of gains and losses in surplus ("Change in net deferred income tax") except to the extent allocated to changes in unrealized gains and losses. Changes in DTAs and DTLs allocated to unrealized gains and losses are netted against the related changes in unrealized gains and losses and are reported as "Change in net unrealized capital gains (losses)", also a separate component of gains and losses in surplus.

State income tax expense is recorded in general administrative expenses in the Statutory Statements of Revenue and Expenses. The company incurred a state tax benefit of (\$37) at December 31, 2018. The Company did not incur any state income tax expense (benefit) for the year ended December 31,2017.

(21) Reinsurance

The Company did not have any Reinsurance at December 31, 2018.

D. Going Concern

As of March 1, 2019, management evaluated whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Company's ability to continue as a going concern and management has determined that it is not probable that the Company will be unable to meet its obligations as they become due within one year after the financial statements are available to be issued. Management will continuously evaluate the Company's ability to continue as a going concern and will take appropriate action and will make appropriate disclosures if there is any change in any condition or events that would raise substantial doubt about the Company's ability to continue as a going concern.

2. Accounting Changes and Corrections of Errors

The Company did not have any accounting changes or correction of errors in the years ended December 31, 2018 and 2017.

3. Business Combinations and Goodwill

The Company was not a part of any business combinations that involved the statutory purchase method, a statutory merger, an assumption reinsurance, or an impairment loss in the years ending December 31, 2018 and 2017.

4. <u>Discontinued Operations</u>

The Company has withdrawn from the market effective December 31, 2007. The Company provided such information to the Michigan Department of Insurance and Financial Services on November 7, 2006 pursuant to M.C.L.A. Section 500.3712. The Company continues to hold an active license in the State of Michigan and continues to hold assets in the State of Michigan to meet state requirements.

5. Investments

- A. The Company did not have any mortgage loans, including Mezzanine Real Estate Loans, at December 31, 2018 or 2017.
- B. The Company did not have any debt restructuring in the years ending December 31, 2018 and 2017.
- C. The Company did not have any reverse mortgages at December 31, 2018 or 2017.

D. <u>Loan-Backed Securities</u>

- (1) Prepayment assumptions for single class and multi-class mortgage-backed/loan-backed securities were obtained from industry market sources.
- (2) The Company did not recognize any other-than-temporary impairments ("OTTI") on loan-backed and structured securities in which the Company had the (1) intent to sell, (2) did not have the intent and ability to retain for a period of time sufficient to recover the amortized cost basis or (3) present value of cash flows expected to be collected is less than the amortized cost basis of the securities in accordance with SSAP No. 43R Loan-Backed and Structured Securities ("SSAP No. 43R") at 2018 on loan-backed and structured securities in which the Company had the (1) intent to sell, (2) did not have the intent and ability to retain for a period of time sufficient to recover the amortized cost basis or (3) present value of cash flows expected to be collected is less than the amortized cost basis of the securities in accordance with SSAP No. 43R Loan-Backed and Structured Securities ("SSAP No. 43R").

- (3) The Company had no recognized OTTI on loan-backed and structured securities currently held, in which the present value of cash flows expected to be collected is less than the amortized cost basis at December 31, 2018.
- (4) The Company had no unrealized loss position on loan-backed and structured securities held by the Company at December 31, 2018.
- (5) The Company has reviewed the loan-backed and structured securities in accordance with SSAP No. 43R in the table above and has concluded that these are performing assets generating investment income to support the needs of the business. Furthermore, the Company has no intention to sell the securities at December 31, 2018 before their cost can be recovered and does have the intent and ability to retain the securities for the time sufficient to recover the amortized cost basis; therefore, no OTTI write-down to fair value was determined to have occurred on these securities.

E. <u>Dollar Repurchase Agreements and/or Securities Lending Transactions</u>

- (1) The Company did not have any repurchase agreements or loaned securities transactions at December 31, 2018.
- (2) The Company did not pledge any of its assets as collateral, which are classified as securities pledged to creditors as of December 31, 2018.
- (3) Neither the Company nor its agent has accepted collateral that is permitted by contract or custom to sell or repledge as of December 31, 2018.
- (4) The Company did not have securities lending transactions administered by an affiliated agent which is "one line" reported at December 31, 2018.
- (5) The Company did not have any repurchase agreements, loaned securities or dollar repurchase agreements at December 31, 2018.
- (6) The Company has not accepted collateral that is not permitted by contract or custom to sell or repledge as of December 31, 2018.
- (7) The Company did not have any collateral for transactions that extend beyond one year from the reporting date.
- F. The Company did not have any repurchase agreements transactions accounted for as secured borrowing at December 31, 2018 or 2017.
- G. The Company did not have any reverse repurchase agreements transactions accounted for as secured at December 31, 2018 or 2017.
- H. The Company did not have any repurchase agreements transactions accounted for as a sale at December 31, 2018 or 2017.
- I. The Company did not have any reverse repurchase agreements transactions accounted for as a sale at December 31, 2018 or 2017.
- J. The Company did not have any real estate at December 31, 2018 or 2017.
- K. The Company did not have any low-income housing tax credits at December 31, 2018.

L Restricted Assets

(1) Restricted assets (including pledged):

		1	2	3	4	5	6	7
	Restricted Asset Category	Total Gross (Admitted & Nonadmitted) Restricted from Current Year	Total Gross (Admitted & Nonadmitted) Restricted from Prior Year	Increase/ (Decrease) (1 minus 2)	Total Current Year Nonadmitted Restricted	Total Current Year Admitted Restricted (1 minus 4)	Gross (Admitted & Nonadmitted) Restricted to Total Assets	Admitted Restricted to Total Admitted Assets (b)
a.	Subject to contractual obligation for which liability is not shown			0		0	0.000	0.000
b.	Collateral held under security lending agreements			0		0	0.000	0.000
C.	Subject to repurchase agreements			0		0	0.000	0.000
d.	Subject to reverse repurchase agreements			0		0	0.000	0.000
e.	Subject to dollar repurchase agreements			0		0	0.000	0.000
f.	Subject to dollar reverse repurchase agreements			0		0	0.000	0.000
g.	Placed under option contracts			0		0	0.000	0.000
h.	Letter stock or securities restricted as to sale - excluding FHLB capital stock			0		0	0.000	0.000
i.	FHLB capital stock			0		0	0.000	0.000
j.	On deposit with states	\$1,150,383	\$1.151.228	(\$845)	\$ —	\$1,150,383	49.276	49.276
k.	On deposit with other regulatory bodies	4 1, 100,000	4 1,101,==0	0	ľ	0	0.000	0.000
I.	Pledged collateral to FHLB (including assets backing funding agreements)			0		0	0.000	0.000
m.	Pledged as collateral not captured in other categories			0		0	0.000	0.000
n.	Other restricted assets			0		0	0.000	0.000
0.	Total Restricted Assets	\$1,150,383	\$1,151,228	(\$845)	\$ —	\$1,150,383	49.276	49.276

⁽a) Column 1 divided by Asset Page, Column 1, Line 28 (b) Column 5 divided by Asset Page, Column 3, Line 28

- (2) The Company did not have any assets pledged as collateral not captured in other categories at December 31, 2018.
- (3) The Company did not have any other restricted assets at December 31, 2018.
- (4) The Company did not have any collateral received and reflected within its financial statements at December 31, 2018.
- M. The Company did not have any working capital finance investments at December 31, 2018.
- N. The Company did not have any offsetting and netting of derivative, repurchase and reverse repurchase, and securities borrowing and securities lending assets or liabilities at December 31, 2018.
- O. The Company did not have any structured notes at December 31, 2018.
- P. The Company did not have any 5GI* securities at December 31, 2018.
- Q. The Company did not have any short sales within the reporting period. December 31, 2018.
- R. The Company did not have any prepayment penalty and acceleration fees at December 31, 2018.

6 Joint Ventures, Partnerships, and Limited Liability Companies

- A. The Company did not have any joint ventures, partnerships, or limited liability companies that exceeded 10% of its admitted assets at December 31, 2018 or 2017.
- B. The Company does not have any impaired investments in joint ventures, partnerships, or limited liability companies at December 31, 2018 or 2017.

7. Investment Income

- A. Due and accrued income was excluded from surplus on the following bases: December 31, 2018 or 2017, except in bonds where collection of interest was uncertain.
- B. There was no amount excluded at December 31, 2018 or 2017.

8. <u>Derivative Instruments</u>

The Company did not have any derivative instruments at December 31, 2018 or 2017.

9. Income Taxes

A.

(1) The components of the net DTAs recognized in the Company's Statutory Statements of Assets and Liabilities, Capital and Surplus are as follows:

		As of E	nd of Current	Period		12/31/2017			Change	
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
		Ordinary	Capital	(Col. 1 + 2) Total	Ordinary	Capital	(Col. 4 + 5) Total	(Col. 1 - 4) Ordinary	(Col. 2 - 5) Capital	(Col. 7 + 8) Total
(a) (b)	Gross Deferred Tax Assets Statutory Valuation Allowance Adjustment			\$—			\$—	\$—	\$—	\$—
(c)	Adjusted Gross Deferred			_			_	_	_	_
	Tax Assets (1a - 1b)	_	_	_	_	_	_	_	_	_
(d)	Deferred Tax Assets Nonadmitted			_			_	_	_	_
(e)	Subtotal Net Admitted Deferred Tax Asset (1c - 1d)									
(f)	Deferred Tax Liabilities	_	_	_	_	_	_	_	_	_
(g)	Net Admitted Deferred Tax Asset/(Net Deferred									
	Tax Liability) (1e - 1f)	\$—	\$—	\$—	\$—	\$—	\$—	\$—	\$—	\$—

(2) The amount of admitted gross DTAs admitted under each component of SSAP No. 101:

	As of End of Current Period				12/31/2017			Change		
	(1)	(2)	(3) (Col. 1 + 2)	(4)	(5)	(6) (Col. 4 + 5)	(7) (Col. 1 - 4)	(8) (Col. 2 -	(9) (Col. 7 + 8)	
	Ordinary	Capital	Total	Ordinary	Capital	Total	Ordinary	5)	Total	
Admission Calculation Components SSAP No. 101 Federal Income Taxes Paid In Prior Years Recoverable Through (a) Loss Carrybacks.			\$—			\$—	\$—	\$—	\$—	
Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of (b) 2(b)1 and 2(b)2 Below)			0			0	0	0	0	
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date. 2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.			0 349,645			0 228,785	0	0	0 120,860	
Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities. Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) +			0			0	0	0	0	
2(c))	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	

3.

2018 2017 (a) Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount. 32,551% 26,484% Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation In 2(b)2 Above. (b) \$1,525,232 \$2,330,968

(4) The impact of tax planning strategies is as follows:

	As of End of C	Current Period	12/31	/2017		
	(1)	(2)	(3)	(4)	(5) (Col. 1 - 3)	(6) (Col. 2 - 4)
	Ordinary	Capital	Ordinary	Capital	Ordinary	Capital
Impact of Tax Planning Strategies:						
(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage. 1. Adjusted Gross DTAs amount from Note 9A1(c)	\$—	\$—	\$—	\$—	\$—	\$
Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies						
Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)	\$—	\$—	\$—	\$—	\$—	\$—
 Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies 						

(b) Do the Company's tax-planning strategies include the use of reinsurance?

Yes[]No[X]

C. Current income taxes incurred consist of the following major components:

			(1)	(2)	(3)
1.	Curr	ent Income Tax	As of End of Current Period	12/31/2017	(Col. 1 - 2) Change
	(a)	Federal	1,525	4,021	-2496
	(b)	Foreign	,	,	0
	(c)	Subtotal	1,525	4,021	-2,496
	(d)	Federal income tax on net capital gains	,	,	0
	(e)	Utilization of capital loss carry-forwards			0
	(f)	Other			0
	(g)	Federal and foreign income taxes incurred	1,525	4,021	-2,496
0	D-f-	and Tou Assats			
2.	(a)	erred Tax Assets: Ordinary:			
		(13) Other (including items <5% of total ordinary tax assets)			0
		(99) Subtotal			
	(b)	Statutory valuation allowance adjustment			0
	(c)	Nonadmitted			0
	(d)	Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	0	0	0
	(e)	Capital:			
		(4) Other (including items <5% of total ordinary tax assets)			0
		(99) Subtotal			
	(f)	Statutory valuation allowance adjustment			0
	(g)	Nonadmitted			0
	(h)	Admitted capital deferred tax assets (2e99 - 2f - 2g)	0	0	0
	(i)	Admitted deferred tax assets (2d + 2h)	0	0	0
3.	Defe	erred Tax Liabilities:			
	(a)	Ordinary:			
		(5) Other (including items <5% of total ordinary tax (99) Subtotal			0
	(b)	Capital:			
		(3) Other (including items <5% of total capital tax liabilities)			0
		(99) Subtotal			
	(c)	Deferred tax liabilities (3a99 + 3b99)	0	0	0
4.	Net	deferred tax assets/liabilities (2i - 3c)	0	0	0

The change in net deferred income taxes is comprised of the following:

	12/31/2018	12/31/2017	Change
Total Deferred Tax Assets	\$0	\$0	\$0
Total Deferred Tax Liabilities	0	0	0
Net Deferred Tax Assets/(Liabilities)	\$0	\$0	\$0
Tax Effect of Unrealized Gains/(Losses)		_	0
Change in Net Deferred Income Tax		=	\$0

The valuation allowance adjustment to gross DTAs was \$0 and \$0 for December 31, 2018 and 2017, respectively. The Company bases its estimates of the future realization of DTAs primarily on historic taxable income and existing DTLs.

D. The provision for federal income taxes is different from that which would be obtained by applying the statutory federal income tax rate to income before income taxes. The items causing this difference were as follows:

	Effective Tax			Effective Tax
	12/31/2018	Rate	12/31/2017	Rate
Provision computed at statutory rate	\$1,525	21 %	\$4,021	35%
Other		0 %		0%
Total	\$1,525	21 %	\$4,021	35%
Federal and foreign income taxes incurred	\$1,525	21 %	\$4,021	35%
Change in net deferred income taxes	0	0 %	0	0%
Total statutory income taxes	\$1,525	21 %	\$4,021	35%

On December 22, 2017, the Tax Cuts and Jobs Act of 2017 (the "TCJA") was enacted, which among other items, reduces the federal corporate tax rate to 21% effective January 1, 2018. We re-measured our deferred income taxes for the year-ended December 31, 2018 and recognized incremental tax expense (benefit) related to the change in our net deferred tax asset/liability.

The transfer pricing adjustment allows taxpayers to apply different methods to price current period intercompany services at arm's length prices as compared to what would be charged to an unrelated entity, which results in a permanent deduction for tax reporting purposes.

E.

- (1) At December 31, 2018 and 2017, the Company had no net capital loss or net operating loss carryforwards for tax purposes.
- (2) The amount of federal income taxes incurred that is available for recoupment in the event of future net losses is as follows:

Year	Ordinary	Capital	Total
2018	\$127		\$127
2018	1,398		1,398
2017	N/A	0	0
Total	\$1,525	\$—	\$1,525

(3) The Company did not report any deposits as admitted assets under Internal Revenue Code Section 6603 at December 31, 2018 and 2017.

F.

(1) At December 31, 2018, the Company's Federal Income Tax Return was consolidated with the following entities:

Aetna Inc.

© Credentials Inc.

Accendo Insurance Company
Accordant Common, LLC

Accordant Health Services, LLC

Accuscript MO, Inc. ACS Acqco Corp.
Active Health Management, Inc. Adminco, Inc.

Administrative Enterprises, Inc.

Advanced Care Scripts, Inc.

Advanced Healthcare Distributors, LLC

AdvancePCS Specialty Rx, LLC

ADVANCERX.COM, LLC

Aetna Behavioral Health, LLC

Aetna Better Health Inc. (Georgia)

Aetna Better Health Inc. (NJ)

Aetna Better Health Inc. (NY)

Aetna Better Health Inc. (OH)

Aetna Better Health Inc. (Tennessee)

Aetna Better Health Inc. (OH)

Actna Better Health of Iowa, Inc.

Actna Better Health of Kansas Inc.

Actna Better Health of Kansas Inc.

Actna Better Health of Kentucky Insurance Co.

Actna Better Health of Michigan, Inc.

Aetna Better Health of Missouri LLC
Aetna Better Health of North Carolina, Inc.
Aetna Better Health of North Carolina, Inc.
Aetna Better Health of Oklahoma Inc.
Aetna Better Health of Washington, Inc.

Aetna Better Health, Inc. (Connecticut)

Aetna Better Health, Inc. (LA)

Aetna Better Health, Inc. (PA)

Aetna Capital Management, LLC

Aetna Card Solutions, LLC

Aetna Dental Inc. (New Jersey)

Aetna Dental Inc. (Texas)

Aetna Dental of California, Inc.

Aetna Financial Holdings, LLC

Aetna Florida, Inc.

Aetna Health Holdings, LLC
Aetna Health Inc. (Connecticut)
Aetna Health Inc. (Florida)
Aetna Health Inc. (Georgia)
Aetna Health Inc. (LA)
Aetna Health Inc. (Maine)
Aetna Health Inc. (New Jersey)

Aetna Health Inc. (NY)

Aetna Health Inc. (Pennsylvania)

Aetna Health Inc. (Texas)

Aetna Health Insurance Company

Aetna Health Insurance Company

Aetna Health Management, LLC

Aetna Health of California Inc.

Aetna Health of Iowa, Inc

Aetna Health Assurance Pennsylvania, Inc

Aetna Health of Utah, Inc.

Aetna HealthAssurance Pennsylvania, Inc.

Aetna Integrated Informatics, Inc.

Aetna International Inc.

Aetna Ireland Inc.

Aetna Life & Casualty (Bermuda) Limited

Aetna Medicaid Administrators LLC

Aetna Network Services LLC

Aetna Pharmacy Management Services, LLC

Aetna Risk Assurance Company of Connecticut

Aetna Rx Home Delivery, LLC

Aetna Student Health Agency, Inc.

Alajasper Realty Services, LLC

Alajasper Realty Services, LLC

Alaska CVS Pharmacy, LLC Allviant Corporation

AMC - New York, Inc.

American Drug Stores Delaware, LLC

Apria Finance Holdings, Inc.

APS-Summit Care Pharmacy, LLC

Arkansas CVS Pharmacy, LLC

ASCO HealthCare, LLC

AUSHC Holdings, Inc. (CT)
Badger Acquisition of Kentucky, LLC
Badger Acquisition of Ohio, LLC

Best Care LTC Acquisition Company, LLC

BPNY Acquisition Corp

bswift, LLC

Campo's Medical Pharmacy, Inc.

Care4, LP

Carecenter Pharmacy, LLC

Caremark Arizona Specialty Pharmacy Holding, LLC Caremark California Specialty Pharmacy Holding, LLC

Caremark Dallas Pharmacy, LLC Caremark Hawaii Mail Pharmacy, LLC

Caremark Irving Resource Center Holding, LLC
Caremark Ohio Specialty Pharmacy Holding, LLC
Caremark PA Specialty Pharmacy Holding, LLC

Caremark Pennsylvania Specialty Pharmacy, LLC

Caremark Puerto Rico Holding, LLC

Caremark Puerto Rico Specialty Pharmacy, LLC

Caremark Redlands Pharmacy, LLC

Caremark Texas Mail Pharmacy Holding, LLC

Caremark Ulysses Holding Corp.

CaremarkPCS Alabama Mail Pharmacy Holding, LLC

CaremarkPCS Health, LLC

CaremarkPCS Pennsylvania Mail Pharmacy, LLC

CCRx Holdings, LLC CCRx of North Carolina, LLC

Choice Source Therapeutic Of Houston, Texas, LLC

CHP Acquisition Corp.

Claims Administration Corporation Compass Health Services, LLC Connecticut CVS Pharmacy, LLC Coram Alternate Site Services, Inc.

Coram Healthcare Corporation of Alabama

Coram Healthcare Corporation Of Greater D.C. Coram Healthcare Corporation of Indiana Coram Healthcare Corporation of Mississippi Coram Healthcare Corporation of North Texas

Coram Healthcare Corporation of Southern California

Coram Healthcare Corporation of Utah Coram Specialty Infusion Services, LLC Corporate Benefit Strategies, Inc.

Coventry Health and Life Insurance Company

Coventry Health Care National Network, Inc. Coventry Health Care of Illinois, Inc. Coventry Health Care of Missouri, Inc. Coventry Health Care of Virginia, Inc.

Coventry Health Care Workers Compensation, Inc.

Coventry HealthCare Management Corporation

Coventry Rehabilitation Services, Inc.

CP Acquisition Corp.

CSR, Inc.

CVS 10015 MA, LLC CVS 10024 VA, LLC CVS 10078 FL, LLC CVS 10117 VA, LLC AMC - Tennessee, Inc.

American Health Holding, Inc.

APS Acquisition LLC Arizona CVS Stores, LLC

ASCO Healthcare of New England Limited Partnership

ASI Wings, LLC Badger Acquisition LLC

Badger Acquisition of Minnesota, LLC Baumel Eisner Neuromedical Institute, LLC Bluegrass Pharmacy of Lexington, LLC

Bruin Acquisition Co., Inc. Busse CVS, LLC #3110

Care Pharmaceutical Services, LP Carecenter Pharmacy, LLC Carefree Insurance Services, Inc.

Caremark Arizona Specialty Pharmacy, LLC
Caremark California Specialty Pharmacy, LLC
Caremark Hawaii Mail Pharmacy Holding, LLC
Caremark Illinois Mail Pharmacy Holding, LLC
Caremark Irving Resource Center, LLC
Caremark Ohio Specialty Pharmacy, LLC

Caremark PCS, LLC Caremark PHC, LLC

Caremark Puerto Rico Specialty Pharmacy Holding, LLC

Caremark Puerto Rico, LLC

Caremark Rx, LLC

Caremark Texas Mail Pharmacy, LLC

Caremark, LLC

CaremarkPCS Alabama Mail Pharmacy, LLC

CaremarkPCS Pennsylvania Mail Pharmacy Holding, LLC

CC Advertising & Marketing, LLC CCRx of North Carolina Holdings, LLC Central Rx Services. LLC

Circle Tallahassee Re, LLC
Cofinity, Inc.
CompScript, LLC
Continuing Care RX, LLC
Coram Clinical Trials. Inc.

Choice Source, LLC

Coram Healthcare Corporation Of Florida

Coram Healthcare Corporation of Greater New York Coram Healthcare Corporation of Massachusetts Coram Healthcare Corporation of Nevada

Coram Healthcare Corporation of Northern California Coram Healthcare Corporation Of Southern Florida

Coram LLC CoramRX, LLC

Coventry Health Care National Accounts

Coventry Health Care National Accounts, Inc.

Coventry Health Care of Florida, Inc.
Coventry Health Care of Kansas, Inc.
Coventry Health Care of Nebraska, Inc.
Coventry Health Care of West Virginia, Inc.
Coventry Health Plan of Florida, Inc.

Coventry Prescription Management Services, Inc.

Coventry Transplant Network, Inc.

CVS 1001 MA, LLC CVS 10019 AR, LLC CVS 10049 KY, LLC CVS 10099 DE, LLC CVS 10125 MA, LLC

CP Services LLC

CVS 10154 GA, LLC CVS 10170 VA, LLC CVS 10175 OK LLC CVS 10196 MA, LLC CVS 10201 MN. LLC CVS 10206 AL. LLC CVS 10208 AL, LLC CVS 10238 DE, LLC CVS 10242 NE, LLC CVS 10251 VA, LLC CVS 10273 OK, LLC CVS 10275 OK, LLC CVS 10279 KY, LLC CVS 10286 VA. LLC CVS 10320 VA. LLC CVS 10326 OK. LLC CVS 10346 FL. LLC CVS 10374 OH. LLC CVS 10376 DE, LLC CVS 10396 MN, LLC CVS 1041 MA, LLC CVS 10410 NE, LLC CVS 10419 WI, LLC CVS 10422 VA, LLC CVS 10430 AR. LLC CVS 10432 AR. LLC CVS 10453 VA. LLC CVS 10454 VA. LLC CVS 10501 MA. LLC CVS 10504 FL. LLC CVS 10515 TN, LLC CVS 10518 AR, LLC CVS 10533 WI, LLC CVS 10534 AR, LLC CVS 10539 AR, LLC CVS 10560 OK, LLC CVS 10563 VA. LLC CVS 10586 VA. LLC CVS 10589 GA. LLC CVS 10644 FL, LLC CVS 10666 AR, LLC CVS 10683 KY, LLC CVS 10684 VA, LLC CVS 10746 VA, LLC CVS 10756 MN, LLC CVS 10768 VA, LLC CVS 10770 VA, LLC CVS 10779 AR, LLC CVS 10781 CO. LLC CVS 10782 CO. LLC CVS 10783 CO. LLC CVS 10784 CO. LLC CVS 10785 CO. LLC CVS 10787 SC. LLC CVS 10788 KY, LLC CVS 1079 GA, LLC CVS 10811 AL, LLC CVS 10812 KY, LLC CVS 10816 AR, LLC CVS 10830 CO, LLC CVS 10831 CO. LLC CVS 10836 MA, LLC CVS 10893 OH. LLC CVS 10898 AL. LLC CVS 10937 VA. LLC CVS 10949 TN, LLC CVS 10958 CO, LLC CVS 10967 VA, LLC CVS 10968 VA, LLC CVS 10975 AR, LLC CVS 10976 OK, LLC CVS 10990 VA, LLC CVS 10992 VA. LLC CVS 11000 CO. LLC CVS 11001 CO. LLC CVS 11002 CO. LLC CVS 11016 AL. LLC CVS 11017 GA. LLC CVS 11019 KY, LLC CVS 11024 CO, LLC CVS 11056 VA, LLC CVS 11070 MN, LLC CVS 11083 VA, LLC CVS 11086 OH, LLC CVS 11089 KY, LLC CVS 11092 OK. LLC CVS 11093 AR. LLC CVS 11104 CO, LLC CVS 11105 CO. LLC CVS 11115 VA, LLC CVS 11155 OH, LLC CVS 11158 AR, LLC CVS 11179 VA, LLC CVS 11233 VA, LLC CVS 1126 FL, LLC **CVS 1131 MA, LLC** CVS 1194 SC, LLC CVS 11337 CO. LLC CVS 1200 SC. LLC CVS 1383 VA. LLC CVS 1420 GA, LLC CVS 1427, LLC CVS 1435 MD, LLC CVS 1452 MD, LLC CVS 1461 MD, LLC CVS 1525 VA, LLC **CVS 1538 VA, LLC** CVS 1547 VA, LLC CVS 1561 VA, LLC CVS 1556 VA. LLC CVS 1589 MI, LLC CVS 1743 AZ, LLC CVS 180 SC. LLC CVS 1803 MA, LLC CVS 2003 VA, LLC CVS 2004 VA, LLC CVS 2019 VA, LLC CVS 2048 RI, LLC **CVS 2065 RI, LLC** CVS 2212 GA, LLC CVS 2545 CT. LLC CVS 264 NJ. LLC CVS 2747 FL, LLC CVS 2776 VA, LLC

CVS 2829 FL, LLC CVS 2948 Henderson, LLC #2948 CVS 301 MA, LLC CVS 3042 DE. LLC CVS 3121 FL, LLC **CVS 3186 WV. LLC** CVS 3227 FL, LLC **CVS 3232 NC, LLC** CVS 3250 FL, LLC CVS 3257 FL, LLC CVS 326 RI, LLC CVS 3268 Gilbert, LLC #3268 CVS 3269 FL. LLC CVS 3271 FL. LLC CVS 3301 OH. LLC CVS 3318 FL. LLC CVS 3320 OH, LLC CVS 3343 OH, LLC **CVS 3353 OH, LLC** CVS 3356 OH, LLC CVS 3380 SC, LLC CVS 3407 OH, LLC CVS 3416 OH, LLC CVS 3418 FL, LLC CVS 3432 OH. LLC CVS 3452 OH. LLC CVS 3460 VA. LLC CVS 3468 OH. LLC CVS 3471 OH, LLC CVS 3537 SC. LLC **CVS 3558 NV, LLC** CVS 3563 NC, LLC CVS 3625 AZ, LLC CVS 3667 FL, LLC CVS 373 MA, LLC CVS 3745 Peoria, LLC #3745 CVS 3749 AZ. LLC CVS 3805 SC. LLC CVS 3818 FL, LLC CVS 3831 NC, LLC CVS 3833 NC, LLC CVS 3923 FL, LLC CVS 3965 AZ, LLC CVS 3967 AZ, LLC CVS 397 RI, LLC CVS 3973 NC, LLC **CVS 3987 NC, LLC** CVS 3988 NC, LLC CVS 4015 FL. LLC CVS 4016 MA, LLC CVS 4073 MA. LLC CVS 410 FL. LLC CVS 4110 TN, LLC CVS 4153 SC, LLC CVS 4225 MD, LLC CVS 4300 OH, LLC CVS 433 MA, LLC CVS 4331 OH, LLC CVS 4380 WI, LLC CVS 4419 WV, LLC CVS 4480 FL. LLC CVS 4485 FL. LLC CVS 449 MA, LLC CVS 4519 MS, LLC CVS 4523 SC, LLC CVS 4533 TN. LLC CVS 4536 MS, LLC CVS 4544 RI, LLC (f/k/a CVS 75566 RI, LLC) CVS 4639 FL, LLC CVS 4669 GA, LLC CVS 4672 GA, LLC CVS 4695 GA, LLC CVS 4738 FL, LLC (f/k/a CVS 75462 FL, LLC) CVS 4769 SC. LLC CVS 4795 AZ. LLC CVS 4832 AL. LLC CVS 4840 AL. LLC CVS 4853 AL. LLC CVS 4896 OK, LLC CVS 4900 AL, LLC CVS 4905 AL, LLC CVS 4944 AL, LLC CVS 4976 AL, LLC CVS 4981 MA, LLC CVS 5018 TN. LLC CVS 4993 MS, LLC CVS 5021 VA, LLC CVS 5029 AZ, LLC **CVS 5089 NY, LLC** CVS 5111 FL, LLC CVS 5112 FL, LLC CVS 5113 NV, LLC CVS 5131 AZ, LLC CVS 516 VA, LLC CVS 5165 FL, LLC CVS 5168 MS, LLC CVS 5180 FL. LLC CVS 5271 KS. LLC CVS 5282 LA, LLC CVS 5354 LA, LLC CVS 5374 LA, LLC CVS 5375 FL, LLC CVS 5382 IL, LLC CVS 5419 SC, LLC CVS 5432 LA, LLC CVS 5448 FL, LLC CVS 5467 VA, LLC CVS 5469 LA, LLC CVS 5492 MN. LLC CVS 5523 GA. LLC CVS 5537 NC, LLC CVS 5542 SC. LLC **CVS 5545 NC, LLC** CVS 5552 SC, LLC **CVS 5568 NC, LLC** CVS 5577 NC, LLC **CVS 5585 NC, LLC** CVS 5589 FL, LLC **CVS 5595 NC, LLC CVS 5616 MN, LLC** CVS 5622 GA. LLC CVS 5625 MO. LLC **CVS 5680 GA, LLC** CVS 5683 GA, LLC

CVS 5740 MS, LLC CVS 5779 AZ, LLC CVS 5783 IL. LLC CVS 5791 AZ 11 C CVS 5793 AZ. LLC CVS 5801 MS. LLC CVS 5812 AZ, LLC CVS 5815 FL, LLC CVS 5816 FL, LLC CVS 582 MA, LLC CVS 5828 CA, LLC CVS 5829 IL, LLC CVS 5849 AZ. LLC CVS 5850 MS, LLC CVS 5856 MA, LLC CVS 5851 IL. LLC CVS 5890 AZ, LLC CVS 5891 AZ, LLC CVS 5892 AZ, LLC CVS 5893 AZ, LLC CVS 590 RI, LLC CVS 5931 AZ, LLC CVS 5934 AZ, LLC **CVS 6009 OK, LLC** CVS 6012 GA. LLC CVS 6073 NJ. LLC CVS 6089 OH. LLC **CVS 6116 KY, LLC** CVS 612 MA, LLC CVS 6135 NJ. LLC CVS 6142 OK, LLC **CVS 6201 MN, LLC** CVS 6233 OK, LLC **CVS 6304 TN, LLC** CVS 6305 WV, LLC **CVS 6306 WV, LLC** CVS 6342 KY, LLC CVS 6349 OH. LLC CVS 6363 TN. LLC CVS 6384 KY, LLC CVS 6395 TN, LLC CVS 6413 TN, LLC CVS 6423, LLC CVS 6429 TN, LLC CVS 6572 IN. II, LLC CVS 6572 IN., LLC CVS 6796 MA, LLC CVS 6852 VA, LLC CVS 6869 DE, LLC **CVS 6867 NV. LLC** CVS 6941 KY, LLC CVS 6874 IN, LLC CVS 6972 FL, LLC CVS 7036, LLC CVS 7047, LLC **CVS 7057 NC, LLC** CVS 7070 MS, LLC CVS 709 FL, LLC **CVS 7109 MA, LLC** CVS 7133 FL, LLC **CVS 7148 NC. LLC** CVS 7157 NC. LLC CVS 7173 FL. LLC **CVS 7180 AL. LLC** CVS 7200. LLC CVS 7215 AL. LLC CVS 7382 NC, LLC CVS 75024 AL, LLC CVS 75121 SC, LLC CVS 75124 MI, LLC CVS 75129 FL, LLC CVS 75137 MD, LLC CVS 75139 NJ. LLC CVS 75144 RI. LLC CVS 75151 OH. LLC CVS 75156 NV. LLC CVS 75157 MI. LLC CVS 75160 SC, LLC CVS 75161 AZ, LLC CVS 75162 AZ, LLC CVS 75163 GA, LLC CVS 75165 GA, LLC CVS 7519 MN, LLC CVS 75195 FL, LLC CVS 75235 RI. LLC CVS 75249 FL. LLC CVS 75257 NJ, LLC CVS 75269 MI. LLC CVS 75275 TN, LLC CVS 75280 NC, LLC CVS 75294 FL, LLC CVS 75307 KS, LLC CVS 75312 VA, LLC CVS 75334 FL, LLC CVS 75363 GA, LLC CVS 75365 GA, LLC CVS 75374 NJ. LLC CVS 75377 NC. LLC CVS 75380 GA. LLC CVS 75393 DE. LLC CVS 75408 FL, LLC CVS 75416 KY, LLC CVS 75441 GA, LLC CVS 75444 NV, LLC CVS 75461 AL, LLC CVS 75485 NC, LLC CVS 75486 KS, LLC CVS 75503 GA, LLC CVS 75536 GA. LLC CVS 75558 FL. LLC CVS 75560 NJ. LLC CVS 75561 NJ. LLC CVS 75562 VA, LLC CVS 75563 MD, LLC CVS 75569 GA, LLC CVS 75572 NC, LLC CVS 75583 MA, LLC CVS 75584 MA, LLC CVS 75590 MN, LLC CVS 75615 FL, LLC CVS 75619 NJ. LLC CVS 75626 GA. LLC CVS 75636 NV, LLC CVS 75642 VA, LLC

ANNUAL STATEMENT FOR THE YEAR 2018 OF TH	E Aetna Health Inc. (a Michigan corporation)
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CVS 75651 SC, LLC CVS 75659 OK. LLC CVS 75660 OK. LLC CVS 75669 MA. LLC CVS 75676 KY, LLC CVS 75679 SC. LLC CVS 75707 FL, LLC CVS 75718 OH, LLC CVS 75719 MN, LLC CVS 75733 NV, LLC CVS 75738 RI, LLC CVS 75740 NJ, LLC CVS 75743 NJ. LLC CVS 75770 NC. LLC CVS 75771 NC, LLC CVS 75774 MA, LLC CVS 75795 DE, LLC CVS 75799 NJ, LLC CVS 75849 NC, LLC CVS 75896 MA, LLC CVS 75905 NJ, LLC CVS 75924 FL, LLC CVS 75935 NV, LLC CVS 75946 VA, LLC CVS 75947 GA. LLC CVS 75952 WI, LLC CVS 75958 MN. LLC CVS 75959 MN. LLC CVS 75961 SC, LLC CVS 75977 MN. LLC CVS 75978 FL, LLC CVS 75995 DE, LLC CVS 7648 KY, LLC CVS 770 FL, LLC CVS 7701, LLC CVS 7885 GA, LLC CVS 7888 GA. LLC CVS 8003 MI, LLC **CVS 8009 MI, LLC CVS 8067 MI, LLC** CVS 8071 MI, LLC CVS 8078 MI, LLC CVS 8086 MI, LLC CVS 8103 MI, LLC CVS 8123 MI, LLC CVS 8133 MI, LLC CVS 8165 MI, LLC CVS 8207 MI, LLC **CVS 8281 MD. LLC** CVS 8302 MI, LLC CVS 8303 TN, LLC **CVS 8415 NE. LLC** CVS 8549 MI. LLC CVS 8615 NE, LLC CVS 866 FL, LLC CVS 8774 WI, LLC CVS 8776 WI, LLC CVS 8909 NC, LLC CVS 8956 MS, LLC CVS 8975 SC, LLC CVS 8993 MS. LLC CVS 920 MA, LLC CVS 921 IL. LLC CVS 932 FL, LLC CVS 962 GA, LLC CVS 9674 CA, LLC CVS 976 FL, LLC CVS AL Distribution, LLC CVS ALBANY, LLC CVS AOC Services, LLC CVS ARCLIGHT, INC. CVS Bay City 8207 MI, LLC CVS Bellmore Avenue, LLC #2154 CVS Caremark Advanced Technology Pharmacy, LLC CVS Caremark Part D Services, LLC CVS Caremark Indemnity Ltd. CVS Durham 7042, LLC CVS EGL 5624 MO. LLC CVS EGL 571 FL, LLC CVS EGL 7958 FL, LLC CVS ETB Holding Company, LLC CVS Falmouth KY, LLC CVS Foreign, Inc. #9736 CVS Gilbert 3272, LLC #3272 CVS Grand Bay 4782, LLC CVS Greensboro, LLC CVS Indiana, LLC #0877 CVS International, LLC CVS Lagrange 4540, LLC CVS Logan 3454, LLC CVS Manchester NH, LLC #0200 CVS Michigan, LLC #9415 CVS Montgomery 6094, LLC CVS NV Holding Company, LLC CVS Orlando FL Distribution, LLC CVS PA Distribution, LLC CVS PR Center Inc. CVS Pharmacy Inc. CVS PR Holding Company, LLC CVS PR Center, Inc. CVS RCI. LLC CVS RS Arizona, LLC CVS Rx Services, Inc. #0886 CVS Safir Sourcing, LLC CVS SC Distribution, LLC CVS SP 5897 FL, LLC CVS State Capital, LLC #0800 CVS TN Distribution, LLC CVS Transportation, LLC CVS TX Holding Company, LLC CVS Vero FL Distribution, LLC CVS Washington 6448, LLC CVS Weymouth 1853, LLC CVS WWRE, INC. D&R Pharmaceutical Services, LLC D.A.W., LLC Delaware CVS Pharmacy, LLC Delaware Physicians Care, Inc. DG Danville KY, LLC Digital EHealth, LLC District Of Columbia CVS Pharmacy, LLC Digital Enterprise Realty, LLC

Echo Merger Sub, Inc

E.T.B., INC.

Eckerd Corporation Of FL, Inc.

Enloe Drugs, LLC
Escalante Solutions, Llc
Evergreen Pharmaceutical, LLC

First Health Group Corp.

First Script Network Services, Inc. FOCUS Healthcare Management, Inc.

Generation Health, LLC

Geneva Woods LTC Pharmacy, LLC

Geneva Woods Pharmacy Alaska, LLC

Geneva Woods Pharmacy Wyoming, LLC Geneva Woods Retail Pharmacy, LLC German Dobson CVS, LLC #5038

Grand St. Paul CVS, LLC

Group Dental Service of Maryland, Inc.

HCP Acquisition Sub, LLC

Health Data & Managment Solutions, Inc.

Healthagen LLC Highland Park CVS, LLC

Home Care Pharmacy, LLC

Hook-Superx, LLC

Idaho CVS Pharmacy, LLC
Interlock Pharmacy Systems, LLC
Ironbound CVS Urban Renewal, LLC

JEC Funding, Inc.

Kansas CVS Pharmacy, LLC Langsam Health Services, LLC LHS Acquisition Sub, LLC

Lo-Med Prescription Services, LLC

Longs Drug Stores, LLC

Managed Care Coordinators, Inc.
Martin Health Services, Inc.
Massachusetts CVS Pharmacy In

Massachusetts CVS Pharmacy, Inc. Medical Arts Health Care, Inc.

Member Health, LLC

Mental Health Network of New York IPA, Inc. Merwin IV & Specialty Pharmacy, LLC Merwin Rx-Compounding Pharmacy, LLC

MHHP Acquisition Company, LLC

MHNet of Florida, Inc.

Minuteclinic Diagnostic Of Alabama, LLC Minuteclinic Diagnostic Of Florida, LLC Minuteclinic Diagnostic Of Hawaii, LLC Minuteclinic Diagnostic Of Kentucky, LLC Minuteclinic Diagnostic Of Maine, LLC

Minuteclinic Diagnostic Of Massachusetts, LLC Minuteclinic Diagnostic Of New Hampshire, LLC

Minuteclinic Diagnostic Of Ohio, LLC
Minuteclinic Diagnostic Of Oregon, LLC
Minuteclinic Diagnostic Of Rhode Island, LLC
Minuteclinic Diagnostic Of Texas, LLC
Minuteclinic Diagnostic Of Virginia, LLC

Minuteclinic Diagnostic Of Wisconsin, LLC Minuteclinic Telehealth Services, LLC Mississippi CVS Pharmacy, LLC Montana CVS Pharmacy, LLC

NCS Healthcare of Illinois, LLC
NCS Healthcare of Iowa, LLC
NCS Healthcare of Kentucky, Inc.
NCS Healthcare of New Hampshire, Inc.

NCS Healthcare of Ohio, LLC NCS Healthcare of Tennessee, Inc.

Employee Assistance Services, LLC
Enterprise Safety Organization, LLC
Exergraph Pharmacoutical of California III

Evergreen Pharmaceutical of California, Inc. Express Pharmacy Services of PA, LLC

First Health Life and Health Insurance Company

Florida Health Plan Administrators, LLC

Garfield Beach CVS, LLC

Geneva Woods Health Services, LLC Geneva Woods Management, LLC

Geneva Woods Pharmacy Washington, LLC

Geneva Woods Pharmacy, Inc. Georgia CVS Pharmacy, LLC Goodyear CVS, LLC #3749 Grandview Pharmacy, LLC Group Dental Service, Inc.

Health and Human Resource Center, Inc.

Health Re, Inc.

HealthAssurance Pennsylvania, Inc.

Holiday CVS, LLC

Home Pharmacy Services, LLC Horizon Behavioral Services, LLC Institutional Health Care Services, LLC

Iowa CVS Pharmacy, LLC

iTriage, LLC

JHC Acquisition, LLC

Kentucky CVS Pharmacy, LLC LCPS Acquisition, LLC Lobos Acquisition, LLC

Longs Drug Stores California, LLC Louisiana CVS Pharmacy, LLC Managed Healthcare, Inc. Maryland CVS Pharmacy, LLC Med World Acquisition Corp.

Melville Realty Co., Inc. Mental Health Associates, Inc.

Meritain Health, Inc. Merwin Long Term Care, Inc.

MetraComp, Inc.

MHNet Life and Health Insurance Company

MHNet Specialty Services LLC

Minuteclinic Diagnostic Of Arizona, LLC
Minuteclinic Diagnostic Of Georgia, LLC
Minuteclinic Diagnostic Of Illinois, LLC
Minuteclinic Diagnostic Of Louisiana, LLC
Minuteclinic Diagnostic Of Maryland, LLC
Minuteclinic Diagnostic Of Nebraska, LLC
Minuteclinic Diagnostic Of New Mexico, LLC
Minuteclinic Diagnostic Of Oklahoma, LLC
Minuteclinic Diagnostic Of Pennsylvania, LLC

Minuteclinic Diagnostic Of Utah, LLC

Minuteclinic Diagnostic Of Washington, LLC Minuteclinic Online Diagnostic Services, LLC

Minuteclinic Diagnostic Of South Carolina, LLC

Minuteclinic, LLC

Missouri CVS Pharmacy, LLC

Mountain Grove Investment Group LLC

NCS Healthcare of Indiana LLC
NCS Healthcare of Kansas, LLC
NCS Healthcare of Montana, Inc.
NCS Healthcare of New Mexico, Inc.
NCS Healthcare of South Carolina, Inc.
NCS Healthcare of Wisconsin, LLC

NCS Healthcare, LLC

Nebraska CVS Pharmacy, LLC

NeighborCare Holdings, Inc.

NeighborCare of Indiana, LLC

NeighborCare of New Hampshire, LLC

NeighborCare Pharmacy of Virginia, LLC

NeighborCare Pharmacy of Virginia, LLC

NeighborCare Pharmacy Services, Inc.

NeighborCare Pharmacy of Virginia, LLC

NeighborCare Pharmacy Services, Inc.

NeighborCare, Inc.

Nevada CVS Pharmacy, LLC New Jersey CVS Pharmacy, LLC

NH Acquisition Sub, LLC Niagara Re, Inc.

NIV Acquisition, LLC North Carolina CVS Pharmacy, LLC

North Shore Pharmacy Services LLC Novologix, LLC

NS Acquisition Sub, LLC
Ocean Acquisition Sub, LLC
OCR Services Corporation
OCR-RA Acquisition, LLC
OCR Services Corporation
OCR Stores, LLC

Oklahoma CVS Pharmacy, LLC Omnicare Distribution Center LLC

Omnicare ESC LLC
Omnicare Foundation
Omnicare Headquarters LLC
Omnicare Holding Company
Omnicare Indiana Partnership Holding Company LLC
Omnicare of Nevada, LLC

Omnicare of New York, LLC Omnicare Pharmacies of Pennsylvania East LLC

Omnicare Pharmacies of Pennsylvania West LLC Omnicare Pharmacies of the Great Plains Holding Company

Omnicare Pharmacy and Supply Services LLC
Omnicare Pharmacy of Maine LLC
Omnicare Pharmacy of Nebraska, LLC

Omnicare Pharmacy of North Carolina, LLC
Omnicare Pharmacy of Tennessee, LLC
Omnicare Pharmacy of Texas 1, LP
Omnicare Pharmacy of Texas 2, LP
Omnicare Pharmacy of the Midwest, LLC

Omnicare Property Management, LLC Omnicare, Inc.

OPGP Acquisition Sub, LLC
Oregon CVS Pharmacy, LLC
PayFlex Holdings, Inc.
OPM Acquisition Sub, LLC
Part D Holding Co., LLC
PayFlex Systems USA, Inc.

Pennsylvania CVS Pharmacy, LLC Pennsylvania Life Insurance Company

Performax, Inc. Pharmacare Holding Company

Pharmacare Pharmacy, LLC Pharmacare Specialty Healthcare Distributors, LLC

Pharmacy Associates of Glens Falls, Inc.

Pharmacy Consultants, LLC

Pharmacy Holding #1, LLC

PharmaSource Healthcare, Inc.

Pharmacy Holding #2, LLC

Pharm-Corp of Maine LLC

PharmaSource Healthcare, Inc.

Pharm-Corp of Maine LLC

Pharmed Holdings, Inc.

Pharmore, Inc.

Phoenix Data Solutions LLC

PMRP Acquisition Company, LLC

PP Acquisition Company, LLC Precision Benefit Services, Inc.

PRN Pharmaceutical Services, LP

Procare 4268 Yankee, LLC

Procare Pharmacy, LLC

Prodigy Health Group, Inc.

Professional Pharmacy Services, Inc.

PSI Arkansas Acquisition, LLC

Red Oak Sourcing, LLC

Professional Risk Management, Inc.

Puerto Rico CVS Pharmacy, LLC

Resources for Living, LLC

Retrac, Inc. #107 Rhode Island CVS Pharmacy, LLC Richmond Heights Acquisition Corp. Roeschen's Healthcare LLC

Rx Innovations 4439, LLC RxAMERICA, LLC

RXC Acquisition Company

Schaller Anderson Medical Administrators Inc
Scrip World, LLC

Sheffield Avenue CVS, LLC #3690

Shore Pharmaceutical Providers, LLC
Silverscript Insurance Company
Sky Acquisition LLC
South Carolina CVS Pharmacy LLC

Sky Acquisition LLC

South Carolina CVS Pharmacy, LLC

South Wabash CVS, LLC #3674

Specialized Pharmacy Services, LLC

Specialty Services Holding LLC

Speedwell CVS Urban Renewal, LLC

Sterling Healthcare Services, Inc.

Strategic Resource Company
Suburban Medical Services, LLC

Superior Care Pharmacy, Inc.

T2 Medical, Inc.

TCPI Acquistion Corp.

Tennessee CVs Pharmacy, LLC

The Vasquez Group, Inc.

Three Forks Apothecary, LLC

Thundermist Services, LLC U.S. Health Care Properties, Inc. UAC Holding, Inc. UC Acquisition Corp.

Uni-Care Health Services of Maine, Inc.

Utah CVS Pharmacy, LLC

Value Health Care Services LLC

Varenont CVS Pharmacy, LLC

VHCS Acquisition Sub, LLC

Virginia CVS Pharmacy, LLC
Washington CVS Pharmacy, LLC
Weber Medical Systems LLC
West Virginia CVS Pharmacy, LLC
Williamson Drug Company, Incorporated
Woodruff Realty Associates, LLC #2085
Work & Family Benefits, Inc.

ZS Acquisition Company, LLC

Washington Lamb CVS, LLC #3172
Wellpartner, LLC
Westhaven Services Co, LLC
Wisconsin CVS Pharmacy, LLC
Woodward Detroit CVS LLC

Warm Springs Road CVS, LLC #2928

Wisconsin CVS Pharmacy, LLC Woodward Detroit CVS, LLC WP Smart Holdings, LLC 976 Miami RE, LLC

- (2) As explained in Note 1, the Company participates in a tax sharing agreement with its parent and affiliates.
- G. The Company does not have any tax loss contingencies for which it is reasonably possible that the total liability will significantly increase within twelve months of the reporting date.
- 10. Information Concerning Parent, Subsidiaries, Affiliates, and Other Related Parties
 - A., B. and C.

The Company paid \$0 as dividends to its parent in 2018 and 2017, respectively.

The Company did not receive any capital contributions in 2018 or 2017.

D. Amounts due to and due from affiliates shown in the accompanying Statutory Statements of Assets and Liabilities, Capital and Surplus and Other Funds include the Company's net receipts and disbursements processed by affiliates and transactions related to its administrative services agreement with Aetna Health Management, LLC ("AHM"), indirectly a wholly-owned subsidiary of Aetna.

At December 31, 2018 and 2017, the Company reported (3,500) and (6,477), respectively, as amounts due from (to) AHM related to this agreement.

The terms of settlement require that these amounts be settled within 45 days after the end of the calendar quarter.

- E. The Company does not have any guarantees or undertakings, written or otherwise at December 31, 2018 and 2017.
- F. As of and for the years ended December 31, 2018 and 2017, the Company had the following significant transactions with affiliates:

The Company and AHM are parties to an administrative services agreement, under which AHM provides certain administrative services, including accounting and processing of premiums and claims. Under this agreement, the Company remits a percentage of its earned commercial, Medicaid and Medicare premium revenue, as applicable, to AHM as a fee, subject to an annual true-up mechanism as defined in the agreement. Under the agreement, this true-up is due to be settled with the affiliate by April 15th of the following contract year (which is January 1 to December 31 annually). The terms of settlement require that these amounts be settled within 45 days after the end of the calendar quarter.

This agreement also provides for interest on all intercompany balances. The Company had no material interest earned or incurred on amounts due from affiliates in 2018 and 2017.

The Company is a party to an agreement that enables the Company to receive manufacturers' pharmacy rebates from AHM under which the Company remits 10% of its earned pharmaceutical rebates to AHM as a fee. The Company had no earned pharmacy rebates in 2018 and 2017. The Company did not incur pharmaceutical rebate fees in 2018 and 2017. At December 31, 2018 and 2017, the Company did not have amounts due from AHM related to pharmaceutical rebates. The terms of settlement require that these amounts be settled within 45 days after the end of the calendar quarter.

The amounts reported on the Underwriting and Investment Exhibit, Part 3 represent the expenses incurred under the terms of the administrative agreement, allocated to the Company in accordance SSAP No. 70 - *Allocation of Expenses* ("SSAP No. 70"). SSAP No. 70 states "shared expenses, including expenses under the terms of a management contract, shall be apportioned to the entities incurring the expense as if the expense had been paid solely by the incurring entity. The apportionment shall be completed based upon specific identification to the entity incurring the expense. Where specific identification is not feasible, apportionment shall be based upon pertinent factors or ratios." The Company allocates these expenses based upon a percentage calculated using actual general and administrative expenses incurred by AHM.

The Company has an insolvency agreement with Aetna Health Insurance Company ("AHIC"), a wholly-owned subsidiary of Aetna. This agreement provides that in the event that the Company ceases operations or becomes insolvent, AHIC will continue to pay benefits for any members confined as inpatients on the date of insolvency until their discharge. This agreement also provides that AHIC will continue benefits for any member until the end of the contract period for which premium has been paid, but for no longer than thirty-one days. AHIC will also make available to members, for a period of thirty-one days, replacement insurance policies.

As explained in Note 1, the Company participates in a tax sharing agreement with Aetna and Aetna's other subsidiaries. All federal income tax receivables/payables are due from/due to Aetna.

- G. All outstanding shares of the Company are owned by Aetna Health Holdings, LLC, whose ultimate parent is CVS Health.
- H. At December 31, 2018, the Company did not own shares of any upstream intermediate of CVS Health.
- I. At December 31, 2018, the Company did not hold any investments in any subsidiary, controlled or affiliated ("SCA") entity that exceeded 10% of the Company's admitted assets.
- J. At December 31, 2018, the Company did not hold any investments in any impaired SCA entity.
- K. At December 31, 2018, the Company did not hold any investments in any foreign insurance subsidiaries.
- L. At December 31, 2018, the Company did not hold any investments in a downstream noninsurance holding company.
- M. At December 31, 2018, the Company did not have any SCA investments.
- N. At December 31, 2018, the Company did not have any investments in an insurance SCA

11. <u>Debt</u>

- A. The Company did not have any items related to debt, including capital notes at December 31, 2018.
- B. The Company did not have any Federal Home Loan Bank agreements at December 31, 2018.
- 12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

The Company did not have a retirement plan, deferred compensation plan, or other postretirement benefit plan at December 31, 2018 or 2017.

- 13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations
 - (1) The Company had 5,000 shares of common capital stock authorized, issued and outstanding with a par value of \$0.01 per share at December 31, 2018 and 2017.
 - (2) The Company had 50 shares of preferred stock with \$.01 par value authorized, no shares issued and outstanding at December 31, 2018 and 2017.
 - (3) Dividend Restrictions

Shareholder dividends shall be declared or paid only from earned surplus, unless the Michigan Department approves the dividend prior to payment. Dividends not requiring prior approval are limited to the greater of 10% of the insured's surplus as regards policyholders as of December 31 of the immediately preceding year, or the net income, not including realized capital gains, for the 12 month period ending December of the immediately preceding year. Ordinary dividends are ultimately limited to earned surplus.

- (4) The Company did not pay any dividends to its parent in 2018 and 2017.
- (5) Within the limitations of 3) above, there are no other restrictions placed on the portion of the Company profits that may be paid as ordinary dividends to the stockholder.

- (6) There were no restrictions placed on the Company's surplus, including for whom the surplus was being held at December 31, 2018 or 2017, except as noted in Note 21.
- (7) Not applicable to the Company.
- (8) The Company did not hold any stock for any special purposes at December 31, 2018 or 2017.
- (9) Changes in the balances of special surplus funds from the prior year are due to the accrual of estimated ACA health insurer fees reclassified from unassigned funds or surplus to aggregate write-ins for special surplus funds as discussed more fully in Note 1.C and Note 22.
- (10) At December 31, 2018 and 2017 there was no portion , respectively, of unassigned funds that was represented or reduced by unrealized gains and losses.
- (11) The Company has not issued any surplus notes or debentures or similar obligations at December 31, 2018 or 2017.
- (12) The Company did not participate in any quasi-reorganizations during the statement year.
- (13) The Company did not participate in any quasi-reorganizations in the past 10 years.

14. Liabilities, Contingencies and Assessments

A. The Company did not have any contingent commitments at December 31, 2018 or 2017.

B. <u>Assessments</u>

Guaranty Fund Assessments

Under guaranty fund laws existing in all states, insurers doing business in those states can be assessed (in most states up to prescribed limits) for certain obligations of insolvent insurance companies to policyholders and claimants. The life and health insurance guaranty associations in which CVS Health and certain of its affiliates, including the Company participate that operate under these laws respond to insolvencies of long-term care insurers as well as health insurers. The Company's assessments generally are based on a formula relating to the Company's health care premiums in the state compared to the premiums of other insurers. Certain states allow assessments to be recovered over time as offsets to premium taxes. Some states have similar laws relating to HMOs and/or other payers such as not-for-profit consumer-governed health plans established under Health Care Reform.

The Company had no assets recognized from paid and accrued premium tax offsets and policy surcharges at December 31, 2018 and 2017.

- C. The Company did not have any gain contingencies at December 31, 2018 or 2017.
- D. The Company did not have any claims related extra contractual obligation and bad faith losses stemming from lawsuits at December 31, 2018 or 2017.
- E. The Company did not have any joint and several liability arrangements at December 31, 2018 or 2017.
- F. Various liabilities arise in the normal course of the Company's business and have been recorded. In the opinion of management, any ultimate contingent losses will not have a material adverse effect on the Company's future results of operations and financial position. The Company, to the best of its knowledge, has no assets that it considers impaired that are not already recorded in the Company's books.

15. <u>Leases</u>

The Company did not have any material lease obligations at December 31, 2018 or 2017.

16. <u>Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk</u>

The Company did not have any financial instruments with off-balance sheet risk or financial instruments with concentrations of credit risk at December 31, 2018 or 2017.

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

A. <u>Transfers of Receivables Reported as Sales</u>

(1) The Company did not have any transfers of receivables as sales for the years ending December 31, 2018 and 2017.

B. Transfer and Servicing of Financial Assets

(1) The Company's policy for requiring collateral or other security for security lending transactions as required in SSAP No. 103R is discussed in Note 1. Excludes repurchase and reverse repurchase transactions as discussed in Notes 5.F. through 5.I. The Company did not have any loaned securities at December 31, 2018 and 2017.

(2) and (3)

The Company did not have any servicing assets or liabilities at December 31, 2018 or 2017.

- (4) The Company did not have any securitized financial assets at December 31, 2018 or 2017.
- (5) The Company did not have any transfers of financial assets accounted for as secured borrowing at December 31, 2018 or 2017.
- (6) The Company did not have any transfers of receivables with recourse at December 31, 2018 or 2017.
- (7) The Company did not have any dollar repurchase or reverse repurchase agreements at December 31, 2018 or 2017.

C. Wash Sales

(1) The Company did not have any wash sales for the years ending December 31, 2018 or 2017.

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

- A. The Company did not serve as an Administrative Services Only for uninsured accident and health plans or the uninsured portion of partially insured plans for the period ended December 31, 2018.
- B. The Company did not serve as an Administrative Services Contract (ASC) plan administrator for uninsured accident and health plans or the uninsured portion of partially insured plans for the period ended December 31, 2018.
- C. The Company did not have any Medicare or other similarly structured cost based reimbursement contracts for the period ended December 31, 2018

19. <u>Direct Premium Written/Produced by Managing General Agents/Third Party Administrators</u>

The Company did not have any material direct premiums written through/produced by managing general agents or third party administrators for the years ended December 31, 2018 and 2017.

20. Fair Value Measurements

A. and B.

The Company had no material assets or liabilities measured and reported at fair value at December 31, 2018 or 2017.

Certain of the Company's financial instruments are measured at fair value in the financial statements. The fair values of these instruments are based on valuations that include inputs that can be classified within one of three levels of a hierarchy established by U.S. generally accepted accounting principles. The following are the levels of the hierarchy and a brief description of the type of valuation information ("inputs") that qualifies a financial asset or liability for each level:

- Level 1 Unadjusted quoted prices for identical assets or liabilities in active markets.
- Level 2 Inputs other than Level 1 that are based on observable market data. These include: quoted prices for similar assets in active markets, quoted prices for identical assets in inactive markets, inputs that are observable that are not prices (such as interest rates and credit risks) and inputs that are derived from or corroborated by observable markets.
- Level 3 Developed from unobservable data, reflecting the Company's own assumptions.

Financial assets and liabilities are classified based upon the lowest level of input that is significant to the valuation. When quoted prices in active markets for identical assets and liabilities are available, the Company uses these quoted market prices to determine the fair value of financial assets and liabilities and classifies these assets and liabilities as Level 1. In other cases where a quoted market price for identical assets and liabilities in an active market is either not available or not observable, the Company estimates fair value using valuation methodologies based on available and observable market information or by using a matrix pricing model. These financial assets and liabilities would then be classified as Level 2. If quoted market prices are not available, the Company determines fair value using broker quotes or an internal analysis of each investment's financial performance and cash flow projections. Thus, financial assets and liabilities may be classified in Level 3 even though there may be some significant inputs that may be observable.

C. The carrying values and estimated fair values of the Company's financial instruments at December 31, 2018 and 2017 were as follows:

<u>December 31, 2018</u>

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)
Bonds, Short Term, and Cash Equivalents	\$1,523,644	\$1,532,449	\$1,515,898	\$7,746	\$ —	0

December 31, 2017

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)
Bonds, Short Term, and Cash Equivalents	\$1,510,431	\$1,527,650	\$1,508,799	\$1,632		

The valuation methods and assumptions used by the Company in estimating the fair value of debt securities are discussed in Note 1.

There were no material realized and unrealized capital gains, purchases, sales, settlements, or transfers into or out of the Company's Level 3 financial assets during 2018 or 2017. There were no transfers between the Company's Level 1 or 2 financial assets during 2018 or 2017.

In evaluating the Company's management of interest rate and liquidity risk and currency exposures, the fair values of all assets and liabilities should be taken into consideration, not only those presented above.

D. The Company did not have any financial instruments where it was not practicable to estimate the fair value.

21. Other Items

A. <u>Unusual or Infrequent Items</u>

The Company did not have any unusual or infrequent items for the years ended December 31, 2018 and 2017.

B. <u>Troubled Debt Restructuring</u>

The Company did not have any troubled debt restructuring in the years ended December 31, 2018 and 2017.

C. <u>Other Disclosures</u>

(1) Minimum Capital and Surplus

Under the laws of the State of Michigan, for a health maintenance organization that contracts or employs providers in numbers sufficient to provide 90% of the health maintenance organization's benefit payout, minimum capital and surplus is the greatest of the following: 1) \$1,500,000, 2) 4% of the health maintenance organization's subscription revenue, or 3) three months' uncovered expenditures. At December 31, 2018 and 2017, the Company's capital and surplus exceeded all such requirements.

The NAIC adopted risk-based capital ("RBC") standards for health organizations, including HMOs, that are designed to identify weakly capitalized companies by comparing each company's adjusted capital and surplus to its required capital and surplus (the "RBC Ratio"). The RBC Ratio is designed to reflect the risk profile of the company. Within certain ratio ranges, regulators have increasing authority to take action as the RBC Ratio decreases. There are four levels of regulatory action, ranging from requiring insurers to submit a comprehensive plan to the state insurance commissioner to requiring the state insurance commissioner to place the insurer under regulatory control. At December 31, 2018 and 2017, the Company had capital and surplus that exceeded the highest threshold specified by the RBC rules.

(2) Health Care Reform

The Patient Protection and Affordable Care Act and the Health Care and Education Reconciliation Act (collectively, "Health Care Reform" or the "ACA"), has made broad-based changes to the U.S. health care system. If the ACA is not further amended, repealed or replaced, certain of its components will continue to be phased in until 2022. While the Company anticipates continued efforts in 2019 and beyond to invalidate, modify, repeal or replace Health Care Reform, the Company expects aspects of Health Care Reform to continue to significantly impact the Company's business operations and financial results, including pricing, medical benefit ratios ("MBRs") and the geographies in which the Company's products are available.

While most of the significant aspects of Health Care Reform became effective during or prior to 2014, parts of Health Care Reform continue to evolve through the promulgation of executive orders, regulations and guidance as well as ongoing litigation. Additional changes to Health Care Reform and those regulations and guidance at the federal and/or state level are likely, and those changes are likely to be significant. Growing state and federal budgetary pressures make it more likely that any changes, including changes at the state level in response to changes to, or invalidation, repeal or replacement of, Health Care Reform and/or changes in the funding levels and/or payment mechanisms of federally supported benefit programs, will be adverse to us. For example, if any elements of Health Care Reform are invalidated or repealed at the federal level, the Company expects that some states would seek to enact similar requirements, such as prohibiting pre-existing condition exclusions, prohibiting rescission of insurance coverage, requiring coverage for dependents up to age 26, requiring guaranteed renewability of insurance coverage and prohibiting lifetime limits on insurance coverage.

Potential repeal of Health Care Reform, ongoing legislative, regulatory and administrative policy changes to Health Care Reform, the results of congressional and state level elections, the December 2018 U.S. District Court decision invalidating Health Care Reform and other pending litigation challenging aspects of the law or funding for the law and federal budget negotiations continue to create uncertainty about the ultimate impact of Health Care Reform. The pending litigation challenging Health Care Reform includes challenges by various states of the federal government's decision to curtail payments related to the Cost-Sharing Subsidy Program. The time frame for conclusion and final outcome and ultimate impact of this litigation are uncertain. Given the inherent difficulty of foreseeing the nature and scope of future changes to Health Care Reform and how states, businesses and individuals will respond to those changes, the Company cannot predict the impact on it of future changes to Health Care Reform. It is reasonably possible that invalidation, repeal or replacement of or other changes to Health Care Reform and/or states' responses to such changes, in the aggregate, could have a significant adverse effect on the Company's businesses, financial results and cash flows.

As described above, the availability of funding for Health Care Reform's temporary risk corridor program is an example of this uncertainty. The Company continues to believe that receipt of any risk corridor payment from HHS for the 2018 or 2017 program year and receipt of such payments in excess of the announced prorated amount for the 2014 program year are uncertain. At December 31, 2018, the Company had a \$0 receivable for the remaining 2014 program year prorated amount that had not been collected from HHS and had no receivable for either of the 2015 or 2016 program years. 2016 was the last program year for Health Care Reform's risk corridor program. On-going uncertainty regarding the funding of Health Care Reform-related programs and subsidies can be expected to create additional instability in the marketplace.

As described above, the availability of funding for Health Care Reform's temporary risk corridor program is an example of this uncertainty. The Company continues to believe that receipt of any risk corridor payment from HHS for the 2016 or 2015 program year and receipt of such payments in excess of the announced prorated amount for the 2014 program year are uncertain. At December 31, 2018, the Company had no receivable for the remaining 2014 program year prorated amount that had not been collected from HHS and had no receivable for either of the 2018 or 2017 program years. 2017 was the last program year for Health Care Reform's risk corridor program. On-going uncertainty regarding the funding of Health Care Reform-related programs and subsidies can be expected to create additional instability in the marketplace.

In addition to efforts to amend, repeal or replace Health Care Reform and the related regulations, the federal and state governments also continue to enact and seriously consider many other broad-based legislative and regulatory proposals that have had a material impact on or could materially impact various aspects of the health care and related benefits system and the Company's business. The Company cannot predict whether pending or future federal or state legislation or court proceedings, including future U.S. Congressional appropriations, will change various aspects of the health care and related benefits system or Health Care Reform or the impact those changes will have on the Company's business operations or operating results, but the effects could be materially adverse.

In addition, Health Care Reform ties a portion of each Medicare Advantage plans' reimbursement to the achievement of favorable CMS quality performance measures ("star ratings"). Since 2015, only Medicare Advantage plans with an overall star rating of four or more stars (out of five stars) are eligible for a quality bonus in their basic premium rates. As a result, the Company's Medicare Advantage plans' operating results in 2017 and going forward will be significantly affected by their star ratings.

- D. The Company did not have any business interruption insurance recoveries for the years ending December 31, 2018 or 2017.
- E. The Company did not have any transferable and non-transferable state tax credits for the years ending December 31, 2018 or 2017.
- F. The Company did not have any subprime mortgage related risk exposures at December 31, 2018 or 2017.
- G. The Company did not have any retained assets at December 31, 2018 or 2017.

H. The Company did not have any insurance-linked securities ("ILS") contracts at December 31, 2018 or 2017.

22. Events Subsequent

A. Type I - Recognized Subsequent Events

Subsequent events have been considered through February 27, 2019 for the statutory statement issued on March 1, 2019.

The Company had no known reportable recognized subsequent events.

B. Type II - Nonrecognized Subsequent Events

Subsequent events have been considered through February 27, 2019 for the statutory statement issued on March 1, 2019.

The Company had no known reportable recognized subsequent events.

23. Reinsurance

The Company did not have any reinsurance recoverables in dispute, reinsurance assumed, uncollectible reinsurance, commutation of ceded reinsurance, or retroactive reinsurance at December 31, 2018 or 2017.

24. Retrospectively Rated Contracts and Contracts Subject to Redetermination

A. and B.

The Company did not have any retrospectively rated contracts in 2018 or 2017.

C. Contracts Subject to Retrospective Rating Features

The Company did not have any contracts subject to retrospective rating features in 2018 or 2017.

D. Medical Loss Ratio Rebates Required Pursuant to the Public Health Service Act

The Company did not have any medical loss ratios required pursuant to the Public Health Service Act in 2018 or 2017.

E. Risk Sharing Provisions of the Affordable Care Act

- (1) Did the reporting entity write accident and health insurance premium which is subject to the ACA risk sharing provisions (YES/NO)? No
- (2) through (5): Not applicable.

25. Change in Incurred Claims and Claims Adjustment Expense

There was no material change in incurred claims and claims adjustment expense at December 31, 2018 or 2017.

26. Intercompany Pooling Arrangements

The Company did not have any intercompany pooling arrangements at December 31, 2018 or 2017.

27. Structured Settlements

Not applicable to health entities.

28. Health Care Receivables

A. Pharmaceutical Rebate Receivables

The Company did not have any pharmaceutical rebates receivables at December 31, 2018 or 2017

B. Risk sharing receivables

The Company did not have any admitted risk sharing receivables at December 31, 2018 or 2017.

29. Participating Policies

The Company did not have any participating policies at December 31, 2018 or 2017.

30. <u>Premium Deficiency Reserves</u>

		December 31, 2018
1.	Liability carried for premium deficiency reserves	\$0
2.	Date of the most recent evaluation of this liability	12/31/2018
3.	Was anticipated investment income utilized in the calculation?	No

31. Anticipated Salvage and Subrogation

See discussion of hospital and medical costs and claims adjustment expenses and related reserves in Note 1.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES GENERAL

1.1	Is the reporting entity a member of an Insurance Holding Company System consisting of two or is an insurer?	more affiliated persons, one or more of which	Yes [X] No []
1.2	If yes, complete Schedule Y, Parts 1, 1A and 2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissiones such regulatory official of the state of domicile of the principal insurer in the Holding Company Sproviding disclosure substantially similar to the standards adopted by the National Association of its Model Insurance Holding Company System Regulatory Act and model regulations pertaining subject to standards and disclosure requirements substantially similar to those required by such	System, a registration statement of Insurance Commissioners (NAIC) in a thereto, or is the reporting entity] No [] N/A []
1.3	State Regulating?		Michigan
1.4	Is the reporting entity publicly traded or a member of a publicly traded group?		Yes [X] No []
1.5	If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the	e entity/group	0000064803
2.1	Has any change been made during the year of this statement in the charter, by-laws, articles of reporting entity?		Yes [] No [X]
2.2	If yes, date of change:		
3.1	State as of what date the latest financial examination of the reporting entity was made or is being	ng made	12/31/2015
3.2	State the as of date that the latest financial examination report became available from either the entity. This date should be the date of the examined balance sheet and not the date the report of the examined balance.		12/31/2015
3.3	State as of what date the latest financial examination report became available to other states of domicile or the reporting entity. This is the release date or completion date of the examination examination (balance sheet date).	eport and not the date of the	06/14/2017
3.4	By what department or departments? Michigan Department of Insurance and Financial Services		
3.5	Have all financial statement adjustments within the latest financial examination report been acc statement filed with Departments?] No [] N/A [X]
3.6	Have all of the recommendations within the latest financial examination report been complied w	vith? Yes [] No [] N/A [X]
4.1		ty), receive credit or commissions for or control	Yes [] No [X] Yes [] No [X]
4.2	During the period covered by this statement, did any sales/service organization owned in whole receive credit or commissions for or control a substantial part (more than 20 percent of any maj premiums) of:	or in part by the reporting entity or an affiliate, or line of business measured on direct	
			Yes [] No [X] Yes [] No [X]
5.1	Has the reporting entity been a party to a merger or consolidation during the period covered by If yes, complete and file the merger history data file with the NAIC.	this statement?	Yes [] No [X]
5.2	If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter ceased to exist as a result of the merger or consolidation.	er state abbreviation) for any entity that has	
	1 Name of Entity NAIC Co	2 3 ompany Code State of Domicile	
6.1	Has the reporting entity had any Certificates of Authority, licenses or registrations (including cor revoked by any governmental entity during the reporting period?		Yes [] No [X]
6.2	If yes, give full information:		
7.1	Does any foreign (non-United States) person or entity directly or indirectly control 10% or more		Yes [] No [X]
7.2	If yes, 7.21 State the percentage of foreign control;	iprocal, the nationality of its manager or	0.0 %
	1 Nationality	2 Type of Entity	

8.1 8.2	Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?					
8.3 8.4	Is the company affiliated with one or more banks, thrifts or securities firms?	Yes []	No [[X]	
	1 2 3 4 5 Affiliate Name Location (City, State) FRB OCC FDIG	6 C SEC				
9. 10.1	What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit? KPMG LLP, One Financial Plaza, 755 Main Street, Hartford, CT 06103 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state					
10.2	law or regulation?	Yes []	No [[X]	
10.3	Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation?	Yes []	No !	[X]	
10.4	If the response to 10.3 is yes, provide information related to this exemption:					
10.5 10.6	Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws?	X] No [] N//	Α []
11.	What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification? Jeffrey J. Drzazgowski, FSA, MAAA: 151 Farmington Avenue, RE2R: Hartford, CT 06156					
12.1	Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?]	No [[X]	
	12.11 Name of real estate holding company					
	12.12 Number of parcels involved					
12.2	12.13 Total book/adjusted carrying value	\$				0
13. 13.1	FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY: What changes have been made during the year in the United States manager or the United States trustees of the reporting entity? N/A					
13.2	Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located?	Yes [1	No !	[]	
13.3	Have there been any changes made to any of the trust indentures during the year?	Yes []	No I	[]	
13.4	If answer to (13.3) is yes, has the domiciliary or entry state approved the changes?] No [N//	Α[]
14.1	Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?	Yes [Х]	No [[]	
	(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;(c) Compliance with applicable governmental laws, rules and regulations;(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and					
14.11	(e) Accountability for adherence to the code. If the response to 14.1 is No, please explain:					
14.2 14.21	Has the code of ethics for senior managers been amended? If the response to 14.2 is yes, provide information related to amendment(s). Through November 28, 2018, senior management was subject to the Aetna Inc. Code of Conduct. Effective with the acquisition of Aetna Inc.	Yes [Х]	No [[]	
14.3	by CVS Health Corporation, senior management become subject to the CVS Health Code of Conduct.	Yes [1	No [[<u> </u>	
	If the response to 14.3 is yes, provide the nature of any waiver(s).	100 [1	110 [1	

	5.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? 5.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.						lo [X]
	1 American Bankers			4				
	Association (ABA) Routing Number Issuing or Confirming Bank Name	Circumstances	That Can Trigger the Letter of Credit		Am	nount		
16.	Is the purchase or sale of all investments of the reporting entity	BOARD OF DIRECTORS passed upon either by the board of						
17.	thereof? Does the reporting entity keep a complete permanent record of	the proceedings of its board of dire	ectors and all subordinate committees		Yes [X]
18.	thereof?	to its board of directors or trustee	s of any material interest or affiliation o	n the	Yes [X Yes [X	-	_]
		FINANCIAL						
19.	Has this statement been prepared using a basis of accounting a Accounting Principles)?	other than Statutory Accounting Pr	inciples (e.g., Generally Accepted		Yes [1 1	lo [X	1
20.1	Total amount loaned during the year (inclusive of Separate Acc	ounts, exclusive of policy loans):	20.11 To directors or other officers		\$, ''	10 [X	0
		,	20.12 To stockholders not officers		\$			0
			(Fraternal Only)	9	\$			0
20.2	Total amount of loans outstanding at the end of year (inclusive	of Separate Accounts, exclusive of						
	policy loans):		20.22 To stockholders not officers	۲	\$ \$			0
			20 23 Truetage currema or grand					
			(Fraternal Only)		\$			0
21.1	Were any assets reported in this statement subject to a contract obligation being reported in the statement?	tual obligation to transfer to another	er party without the liability for such		Yes [1 1	ln [X	1
21.2	If yes, state the amount thereof at December 31 of the current y		21.21 Rented from others		\$, ,,	10 [X	0
			21.22 Borrowed from others	9	\$			0
			21.23 Leased from others		\$			0
			21.24 Other		\$			0
22.1	Does this statement include payments for assessments as designaring association assessments?		······································					
22.2	If answer is yes:	22	2.21 Amount paid as losses or risk adju	ıstment \$;			0
			2.22 Amount paid as expenses					
00.4	December of the second		2.23 Other amounts paid					
23.1 23.2	Does the reporting entity report any amounts due from parent, s If yes, indicate any amounts receivable from parent included in							
	,,,			,	,			
		INVESTMENT						
24.01	Were all the stocks, bonds and other securities owned December the actual possession of the reporting entity on said date? (other				Yes [X]	No []
24.02	If no, give full and complete information relating thereto							
24.03	For security lending programs, provide a description of the programster collateral is carried on or off-balance sheet. (an alternative are not currently investing in the securities lending programster)	itive is to reference Note 17 where	this information is also provided)					
24.04	Does the Company's security lending program meet the require Instructions?			Yes [] No []	N/A [Х]
24.05	If answer to 24.04 is yes, report amount of collateral for conform	ning programs.			\$			0
24.06	If answer to 24.04 is no, report amount of collateral for other pro-	ograms.			\$			0
24.07	Does your securities lending program require 102% (domestic outset of the contract?	securities) and 105% (foreign secu	rities) from the counterparty at the	Yes [] No []	N/A [Х]
24.08	Does the reporting entity non-admit when the collateral received	d from the counterparty falls below	100%?	Yes [] No []	N/A [Х]
24.09	Does the reporting entity or the reporting entity 's securities lend conduct securities lending?	ding agent utilize the Master Secur	ities lending Agreement (MSLA) to	Yes [] No []	N/A [Х]

24.10	For the reporting entity'	s security lending program stat	te the amount of t	the following as Decen	nber 31 of the cu	ırrent year:			
		Total fair value of reinvested of							
	24.102	Total book adjusted/carrying v	value of reinveste	d collateral assets rep	orted on Schedu	ile DL, Parts 1 and 2	\$		
25.1	24.103 Total payable for securities lending reported on the liability page								
25.2	If yes, state the amount	fives state the amount thereof at December 21 of the current year:							
20.2	ii yes, state the amoun	If yes, state the amount thereof at December 31 of the current year: 25.21 Subject to repurchase agreements\$ 25.22 Subject to reverse repurchase agreements\$							
				25.23 S	ubject to dollar re	epurchase agreements		\$	
						dollar repurchase agreements			
				05.001					
				e	cluding FHLB C	Capital Stock		\$	
				25.27 FI	HLB Capital Stoo	ckates		\$ c 1 150 3	
				25.28 O 25.29 O	n deposit with st n deposit with ot	her regulatory bodies		\$1, 130,3 \$	
				25 30 P	edged as collate	eral - excluding collateral pled	daed to		
				ai as at Bi	n FHLB	prol to EULP including ages	to	\$	
				25.31 F	edged as collate scking funding a	eral to FHLB - including asse greements	:15	\$	
				25.32 O	ther			\$	
25.3	For category (25.26) pr	1 Nature of Restriction				ion			
26.1	Does the reporting entire	ty have any hedging transaction	ns reported on So	chedule DB?				Yes [] No [X]	
26.2	If yes, has a comprehent of no, attach a description	nsive description of the hedging on with this statement.	g program been n	nade available to the o	lomiciliary state?	?١	/es [] No [] N/A [X	
27.1		cks or bonds owned as of Dece equity?						Yes [] No [X]	
27.2	If yes, state the amount	thereof at December 31 of the	e current year					\$	
28.	offices, vaults or safety custodial agreement wi	edule E - Part 3 - Special Depo deposit boxes, were all stocks th a qualified bank or trust com Functions, Custodial or Safeke	, bonds and other	r securities, owned thruce with Section 1, III -	oughout the curr General Examir	ent year held pursuant to a nation Considerations, F.	-	Yes [X] No []	
28.01	For agreements that co	mply with the requirements of	the NAIC Financi	al Condition Examiner	s Handbook, cor	mplete the following:			
		1				2			
	State Street Bank and	ne of Custodian(s) Trust Company	State Stre	eet Financial Center;	One Lincoln St	<u>an's Address</u> reet; Boston, MA 02111-290	0		
		. ,		·					
28.02	For all agreements that and a complete explana	do not comply with the require ation:	ements of the NAI	C Financial Condition	Examiners Hand	dbook, provide the name, loc	ation		
		1 Name(s)		2 Location(s)		3 Complete Exp	olanatio	n(s)	
						_			
		nanges, including name chango plete information relating there		an(s) identified in 28.0	1 during the curr	ent year?		Yes [] No [X]	
	014.0		2		3		4		
	Old Cu	stodian	New Cus	stoalan	Date of Cha	nge R	leason		
		<u></u>							

8.05	Investment management – Identify all invemake investment decisions on behalf of the such. ["that have access to the investment of the i	e reporting entity. For as	sets that are m							
	Name of Firm o Kevin J. Casey as Sr. Investment Office		A	2 Affiliation						
	28.0597 For those firms/individuals listed in designated with a "U") manage m	n the table for Question	28.05, do any f					Ye:	s []	No [X
	28.0598 For firms/individuals unaffiliated v total assets under management a	vith the reporting entity (i aggregate to more than 5	.e. designated 0% of the repo	with a "U") listerting entity's as	ed in the table ssets?	for Questic	on 28.05, does the	Ye:	s []	No [X
8.06	For those firms or individuals listed in the the table below.	able for 28.05 with an af	filiation code of	f "A" (affiliated)	or "U" (unaffil	liated), prov	vide the information	for		
	1	2		3			4		Inve	5 stment
		Name of Firm or Individu	al	Legal Entity Ide			Registered With		Agre (IMA	ement () Filed
	N/A Kevin J. Ca					-	tered			
	Does the reporting entity have any diversif Exchange Commission (SEC) in the Inves If yes, complete the following schedule:	ied mutual funds reporte tment Company Act of 1	d in Schedule 940 [Section 5	D, Part 2 (diver (b)(1)])?	rsified accordi	ng to the Se	ecurities and	Yes	s []	No [X
	1		:	2				Bool	3 <td>ed</td>	ed
	CUSIP # 29.2999 - Total		Name of M	lutual Fund				Carr	ying Valu	ue 0
	1 Name of Mutual Fund (from a	above table)	Nai	2 me of Significa Mutual	nt Holding of t	he	3 Amount of Mu Fund's Book/Adj Carrying Vali Attributable to Holding	usted Je	4 Date Valuat	
30.	Provide the following information for all sh statement value for fair value.	ort-term and long-term b	onds and all pr	eferred stocks.	. Do not subs	titute amort	ized value or	•		<u>_</u>
				1	2	F	3 Excess of Statement			
				nt (Admitted) /alue	Fair Vali	0	ver Fair Value (-), o Fair Value over Statement (+)			
	30.1 Bonds			1,150,383	1,	141,578	(8,805			
	30.2 Preferred stocks			1,150,383	1,	0 141,578	(8,805			
0.4	Describe the sources or methods utilized i Fair value of long term bonds and preferre methodologies based on available and ob- we determine fair value using broker quote Short-term investments are carried at amo value.	d stocks are determined servable market informat ed or an internal analysis ortized cost which approx	based on quot tion, or by using of each invest timated fair valu	g matrix pricing ment's financia ue. The carryir	 If quoted mand performance g value of case 	arket prices and cash sh equivale	s are not available, flow projections. ents approximated fa	ir		
1.1	Was the rate used to calculate fair value d	letermined by a broker or	r custodian for	any of the secu	ırities in Sche	dule D?		Yes	s [X]	No [
1.2	If the answer to 31.1 is yes, does the reportal brokers or custodians used as a pricing								s [X]	No [
1.3	If the answer to 31.2 is no, describe the re value for Schedule D:		J	•		•				
	Have all the filing requirements of the Purp If no, list exceptions:	poses and Procedures M			·				s [X]	No [

33.	 By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security: a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available. b. Issuer or obligor is current on all contracted interest and principal payments. c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal. Has the reporting entity self-designated 5GI securities? 					
34.	By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security: a. The security was purchased prior to January 1, 2018. b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security. c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators. d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO. Has the reporting entity self-designated PLGI securities?	- Yes [] No [X]			
	OTHER					
35.1	Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?	\$	0			
35.2	List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade association service organizations and statistical or rating bureaus during the period covered by this statement.	ns,				
	1 2 Name Amount Paid					
36.1	Amount of payments for legal expenses, if any?	\$	0			
36.2	List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.					
	1 2					
	Name Amount Paid					
37.1	Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any?	\$	0			
37.2	List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.					
	1 2 Name Amount Paid					

GENERAL INTERROGATORIES

PART 2 - HEALTH INTERROGATORIES

1.1	Does the reporting entity have any direct Medicare Supplement Insurance in force? Yes indicate premium earned on U.S. business only. \$					
1.2	What portion of Item (1.2) is not reported on the Medicare Supplement Insurance 1.31 Reason for excluding					
1.4	Indicate amount of earned premium attributable to Canadian and/or Other Alien no					
1.5	Indicate total incurred claims on all Medicare Supplement Insurance.		.\$ 0			
1.6	Individual policies:	Most current three years:	• 0			
		1.61 Total premium earned				
		1.62 Total incurred claims				
		1.63 Number of covered lives				
		All years prior to most current three years:				
		1.64 Total premium earned	.\$U			
		1.65 Total incurred claims 1.66 Number of covered lives				
		1.66 Number of covered lives				
1.7	Group policies:	Most current three years:				
	aroup politico.	1.71 Total premium earned	\$ 0			
		1.72 Total incurred claims				
		1.73 Number of covered lives	0			
		All years prior to most current three years:				
		1.74 Total premium earned	.\$0			
		1.75 Total incurred claims	.\$0			
		1.76 Number of covered lives	0			
2.	Health Test:	1				
		1 2 Current Year Prior Year				
	2.1 Premium Numerator	00				
	2.2 Premium Denominator					
	2.3 Premium Ratio (2.1/2.2)					
	2.4 Reserve Numerator					
	2.5 Reserve Denominator					
	2.6 Reserve Ratio (2.4/2.5)	0.0000.000				
3.1	Has the reporting entity received any endowment or gift from contracting hospitals returned when, as and if the earnings of the reporting entity permits?		Yes [] No [X]			
4.1	Have copies of all agreements stating the period and nature of hospitals', physicia dependents been filed with the appropriate regulatory agency?		Yes [] No [X]			
4.2	If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these	agreements include additional benefits offered?	Yes [] No [X]			
5.1	Does the reporting entity have stop-loss reinsurance?		Yes [] No [X]			
5.2	If no, explain: The Company does not have stop-loss reinsurance.					
5.3	Maximum retained risk (see instructions)	5.31 Comprehensive Medical				
	·	5.32 Medical Only	.\$0			
		5.33 Medicare Supplement	.\$0			
		5.34 Dental & Vision	\$0			
		5.35 Other Limited Benefit Plan	.\$0			
		5.36 Other	.\$0			
6.	Describe arrangement which the reporting entity may have to protect subscribers a hold harmless provisions, conversion privileges with other carriers, agreements with agreements: The Company does not currently sell to or insure members in Michigan.	ith providers to continue rendering services, and any other				
7.1	Does the reporting entity set up its claim liability for provider services on a service	date basis?	Yes [X] No []			
7.2	If no, give details					
8.	Provide the following information regarding participating providers:	8.1 Number of providers at start of reporting year	0			
9.1	Does the reporting entity have business subject to premium rate guarantees?		Yes [] No [X]			
9.2	If yes, direct premium earned:	9.21 Business with rate guarantees between 15-36 months. 9.22 Business with rate guarantees over 36 months	\$0			

10.1	Does the reporting entity have Incentive Pool, Withh	old or Bonus Ar	rangements in its p	rovider contracts?			. Yes []	No [X]
10.2	If yes:		1(1(0.22 Amount actua 0.23 Maximum am	Illy paid for year bo ount payable withh	sesoldsthholds	\$	0 0
11.1	Is the reporting entity organized as:			11.13 An Individ	al Group/Staff Mode dual Practice Asso Model (combinatio	ciation (IPA), or, .	Yes [X] No [X]] No []] No [X]
11.2 11.3 11.4 11.5 11.6	Is the reporting entity subject to Statutory Minimum (If yes, show the name of the state requiring such min If yes, show the amount required. Is this amount included as part of a contingency result the amount is calculated, show the calculation	nimum capital ar	nd surplusld surplusld surplusld surplus				\$	No [] <u>Michigan</u> 1,500,000 No [X]
12.	See Notes to Financial Statement - Note 21, Other I: List service areas in which reporting entity is license		Disclosures.					
		-		e Area ne, Oakland				
13.1	Do you act as a custodian for health savings accoun	ts?					. Yes []	No [X]
13.2	If yes, please provide the amount of custodial funds	held as of the re	porting date				\$	0
13.3	Do you act as an administrator for health savings ac	counts?					Yes []	No [X]
13.4	If yes, please provide the balance of funds administe	ered as of the re	porting date				\$	0
14.1 14.2	Are any of the captive affiliates reported on Schedule If the answer to 14.1 is yes, please provide the follow		orized reinsurers?			Yes [] No [] N/A [X]
	1	2	3	4	Assets	Supporting Reserv	e Credit	
	Company Name	NAIC Company Code	Domiciliary Jurisdiction	Reserve Credit	5 Letters of Credit	6 Trust Agreements	7 Other	
15.	Provide the following for individual ordinary life insur ceded):	ance* policies (l	J.S. business only	15.1 C 15.2 T	Direct Premium Wr Total Incurred Clain	ince assumed or itten	\$	0
10	Term(whether full und Whole Life (whether f Variable Life (with or Universal Life (with or Variable Universal Life)	derwriting, limited ull underwriting, without seconda without second e (with or withou	limited underwritin ry gurarantee) ary gurarantee) it secondary gurara	ssue, "short form a g, jet issue, "short antee)	form app")		Vac [] N	lo [Y]
16.	Is the reporting entity licensed or chartered, registered						Yes [] N	0 [X]
16.1	If no, does the reporting entity assume reinsurance be domicile of the reporting entity?						Yes [] N	lo [X]

FIVE-YEAR HISTORICAL DATA

		1 2018	2 2017	3 2016	4 2015	5 2014
	Balance Sheet (Pages 2 and 3)					
1.	Total admitted assets (Page 2, Line 28)	2,334,561	1,531,838	1,518,434	1,506,085	1,514,059
2.	Total liabilities (Page 3, Line 24)	3,593	6,607	669	770	380
3.	Statutory minimum capital and surplus requirement	1,500,000	1,500,000	1,500,000	1,500,000	1,500,000
4.	Total capital and surplus (Page 3, Line 33)	2,330,968	1,525,231	1,517,765	1,505,315	1,513,679
	Income Statement (Page 4)					
5.	Total revenues (Line 8)	0	0	0	0	0
6.	Total medical and hospital expenses (Line 18)	(1,497)	0	0	0	0
7.	Claims adjustment expenses (Line 20)	0	0	0	0	0
8.	Total administrative expenses (Line 21)	10,228	728	5,335	19,655	5,054
9.	Net underwriting gain (loss) (Line 24)	(8,731)	(728)	(5,335)	(19,655)	(5,054)
10.	Net investment gain (loss) (Line 27)	15,993	12,215	9,491	6,980	8,845
11.	Total other income (Lines 28 plus 29)	0	0	0	(126)	0
12.	Net income or (loss) (Line 32)	5,737	7,466	2,699	(8,364)	2,461
	Cash Flow (Page 6)					
13.	Net cash from operations (Line 11)	8,621	4,047	21,275	(13,214)	6,300
	Risk-Based Capital Analysis					
14.	Total adjusted capital	2,330,968	1,525,231	1,517,765	1,505,315	1,513,679
15.	Authorized control level risk-based capital	7, 161	5,759	5,821	5,767	5,839
	Enrollment (Exhibit 1)					
16.	Total members at end of period (Column 5, Line 7)	0	0	0	0	0
17.	Total members months (Column 6, Line 7)	0	0	0	0	0
	Operating Percentage (Page 4) (Item divided by Page 4, sum of Lines 2, 3 and 5) x 100.0					
18.	Premiums earned plus risk revenue (Line 2 plus Lines 3 and 5)	100.0	100.0	100.0	100.0	100.0
19.	Total hospital and medical plus other non-health (Lines 18 plus Line 19)	0.0	0.0	0.0	0.0	0.0
20.	Cost containment expenses	0.0	0.0	0.0	0.0	0.0
21.	Other claims adjustment expenses	0.0	0.0	0.0	0.0	0.0
22.	Total underwriting deductions (Line 23)			0.0	0.0	0.0
23.	Total underwriting gain (loss) (Line 24)	0.0	0.0	0.0	0.0	0.0
	Unpaid Claims Analysis (U&I Exhibit, Part 2B)					
24.	Total claims incurred for prior years (Line 13, Col. 5)	0	0	0	0	0
25.	Estimated liability of unpaid claims-[prior year (Line 13, Col. 6)]	0	0	0	0	0
	Investments In Parent, Subsidiaries and Affiliates					
26.	Affiliated bonds (Sch. D Summary, Line 12, Col. 1)	0	0	0	0	0
27.	Affiliated preferred stocks (Sch. D Summary, Line 18, Col. 1)					
28.	Affiliated common stocks (Sch. D Summary, Line 24, Col. 1)	0	0	0	0	0
29.	Affiliated short-term investments (subtotal included in Schedule DA Verification, Col. 5, Line 10)	0	0	0	0	0
30.	Affiliated mortgage loans on real estate					
31.	All other affiliated				0	
32.	Total of above Lines 26 to 31					
33.	Total investment in parent included in Lines 26 to 31 above.	0	0	0	0	

NOTE: I	If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure			
	requirements of SSAP No. 3, Accounting Changes and Correction of Errors?	Yes [] No []
li	f no, please explain:			

SCHEDULE T PREMIUMS AND OTHER CONSIDERATIONS

Allocated by States and Territories										
		1	2	3	4	Direct Bus 5	siness Only 6	7	8	9
				S	4	Federal Employees Health	Life & Annuity			3
	0	Active Status	Accident & Health	Medicare	Medicaid	Benefits Plan	Premiums & Other	Property/ Casualty	Total Columns 2	Deposit-Type
1.	States, etc. Alabama AL	(a)	Premiums	Title XVIII 0	Title XIX	Premiums 0	Considerations	Premiums 0	Through 7	Contracts
2.	Alaska AK	NN	0	0	0 0	0	0	 N		 n
3.	Arizona AZ	N	0	0		0	0	0	0	0
4.	Arkansas AR	N	0	0	0	0	0	0	0	0
5.	California CA	N	0	0	0	0	0	0	0	0
6.	Colorado CO	NN	0	0	0	0	0	0	0	0
7.	Connecticut CT	N	0	0	0	0	0	0	0	0
8.	Delaware DE	N	0	0	0	0	0	0	0	0
9.	District of Columbia . DC	N	0	0	0	0	0	0	0	0
10.	Florida FL	N	0	0	0	0	0	0	0	0
11. 12.	Georgia GA Hawaii HI	NN.	<u>U</u>	0	 0	0		0	0	
13.	Idaho ID	N	U	0	0	0 0			u	 N
14.	Illinois II	N	0	0	0	0	0	0	0	0
15.	IndianaIN	N.	0	0	0	0	0	0	0	0
16.	lowa IA	N	0	0	0	0	0	0	0	0
17.	Kansas KS	N	0	0	0	0	0	0	0	0
18.	Kentucky KY	N	0	0	0	0	0	0	0	0
	Louisiana LA	N	ļ <u>0</u>	0	0	0	ļ	0	0	0
20.	Maine ME	N	₀	0	0 n	0	ļ	ō	0	0
21. 22.	Maryland MD Massachusetts MA	IV	† <u>0</u>	0 0	<u>U</u>	0	ļ	0	0	U
23.	Massachusetts MA Michigan MI	I	n	0	 0	0	n	n	بر م	 n
24.	Minnesota MN	N	0	0	0	0	0	n	0	0
25.	Mississippi MS	N	0	0	0	0	0	0	0	0
26.	Missouri MO	N	0	0	0	0	0	0	0	0
27.	Montana MT	N	0	0	0	0	0	0	0	0
28.	Nebraska NE	N	0	0	0	0	0	0	0	0
29.	Nevada NV	N	0	0	0	0	0	0	0	0
	New Hampshire NH	N	0	0	0	0	0	0	0	0
	New Jersey NJ	NN.	1	0	0	0	ļ		0	0
32. 33.	New Mexico NM New York NY	NN.		 0	 0	U		0		
34.	North Carolina NC	NN.	0	0	 0	0		n	0	0 0
	North Dakota ND	N	0	0	0	0	0	0	0	0
36.	Ohio OH	N.	0	0	0	0	0	0	0	0
37.	Oklahoma OK	N	0	0	0	0	0	0	0	0
38.	Oregon OR	N	0	0	0	0	0	0	0	0
39.	Pennsylvania PA	N	0	0	0	0	0	0	0	0
	Rhode Island RI	N	0	0	0	0	0	0	0	0
41.	South Carolina SC	N	0	0	0		0	0	0	0
42. 43.	South Dakota SD Tennessee TN	NN	0	0	0 0	0	ļ	0	0	U
43. 44.	Texas TX	NN.	0	0	0 0	0	0	0	n	n
45.	Utah UT	N	0	0	0	0	0	0	0	0
46.	Vermont VT	N	0	0	0	0	0	0	0	0
47.	Virginia VA	N	0	0	0	0	0	0	0	0
48.	Washington WA	N	0	0	0	0	0	0	0	0
	West Virginia WV	N	0	0	0	0	0	0	0	0
	Wyoming W/	N	0	0	0	0	0	0	0	0
51. 52.	Wyoming WY American Samoa AS	NNN.	0	0	0 0	0	0	0	0	0
52.	Guam GU	NN	0	0	0	0	n	0	0	ν Λ
	Puerto Rico PR	N	0	0	0	0	0	0	0	0
55.	U.S. Virgin Islands VI	N	0	0	0	0	0	0	0	0
	Northern Mariana									
	Islands MP	N	0	0	0	0	0	0	0	0
	Canada CAN	N	0	0	0	0	} ⁰	0	0	0
58.	Aggregate other alien OT	XXX	0	0	0	0	0	0	0	0
59.	Subtotal	XXX	0	0	0	0	0	0	0	0
60.	Reporting entity									
	contributions for Employe	e	_	0	0	^	_	_	0	^
61.	Benefit Plans Total (Direct Business)	XXX	0	0 0	0 0	0 0	0	0	0	0 0
<u> </u>	DETAILS OF WRITE-INS	^^^	0	U	U	0	1	0	J	U
58001.	DETAILS OF WHITE-INS	XXX					1			
58002.		XXX								
58003.		XXX					ļ		ļ	
58998.	Summary of remaining									
	write-ins for Line 58 from	VVV	0	0	0	0	0	0	_	0
58999	overflow page Totals (Lines 58001 through	XXX			0	0	1	0	0	0
	58003 plus 58998)(Line 58									
	above)	XXX	0	0	0	0	0	0	0	0
(a) Active	Status Counts:									

⁽a) Active Status Counts:
L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG...
E - Eligible - Reporting entities eligible or approved to write surplus lines in the state...
N - None of the above - Not allowed to write business in the state... 0

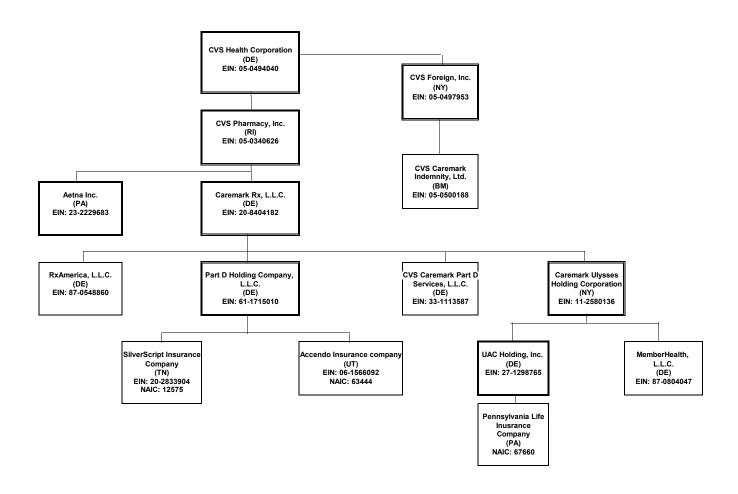
⁽b) Explanation of basis of allocation by states, premiums by state, etc.

R - Registered - Non-domiciled RRGs...

Q - Qualified - Qualified or accredited reinsurer. ____0

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART



This organizational chart reflects the insurrance entity reporting system and identifies the relationship between the ultimate parent and all member insurers.

The ultimate controlling company is a Fortune 7 company with numerous subsidiaries, the majority of which do not interact with the insurance entities.

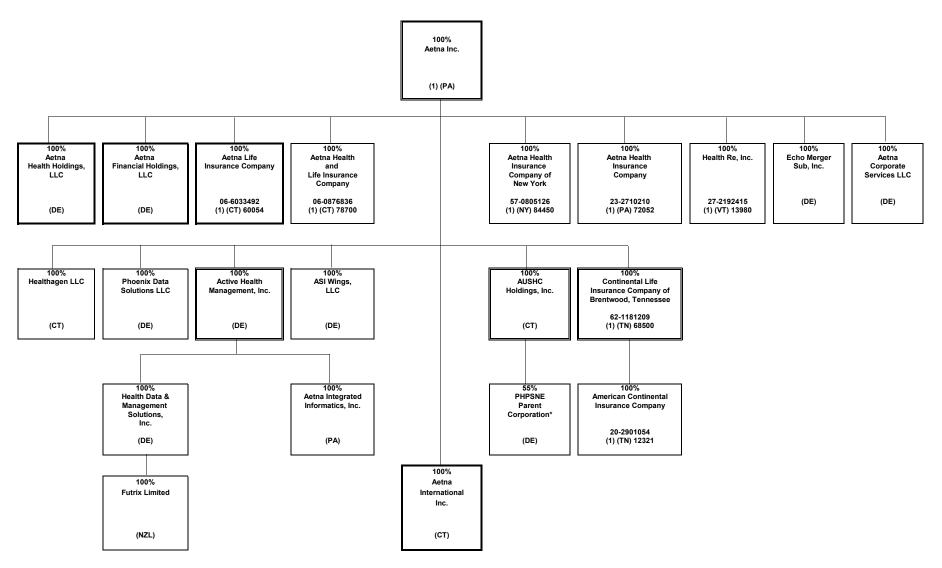
Percentages are rounded to the nearest whole percent and based on ownership of voting rights.

Double borders indicate entity has subsidiaries shown on the same page.

Bold borders indicate entity has subsidiaries shown on a separate page.

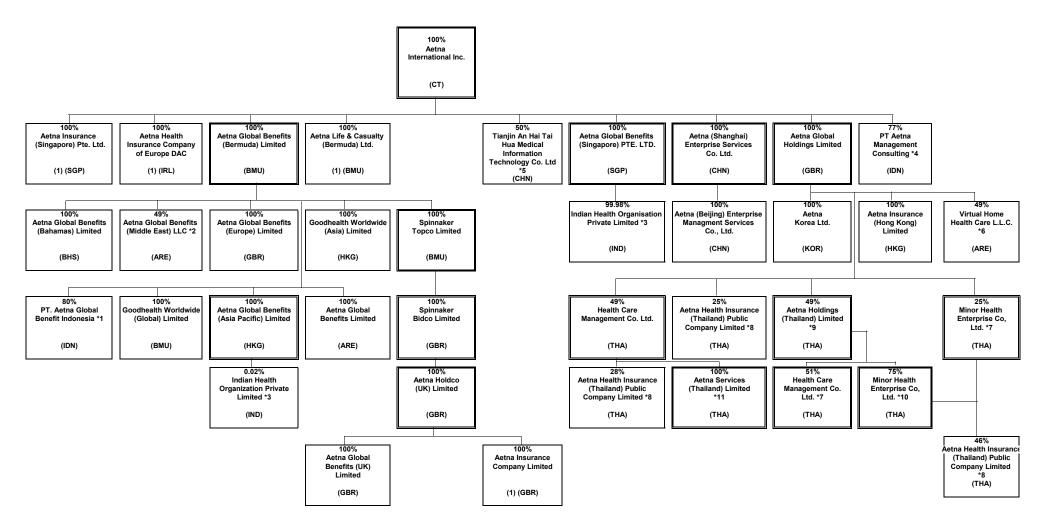
⁽¹⁾ Insurers/HMO's

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP



^{*} PHPSNE Parent Corporation is also 45% owned by third parties.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP



^{*1} PT. Aetna Global Benefits Indonesia is also 20% owned by Suhatsyah Rivai, Aetna's Nominee.

^{*2} Aetna Global Benefits (Middle East) LLC is also 51% is owned by Euro Gulf LLC, Aetna's Nominee.

^{*3} Indian Health Organisation Private Limited is 0.019857% owned by Aetna Global Benefits (Asia Pacific) and 99.980143% owned by Aetna Global Benefits (Singapore) PTE. LTD.

^{*4} PT Asuransi Aetna Asia is also 23% owned by PT Asuransi Central Asia.

^{*5} Tianjin An Hai Tai Hua Medical Information Technology Co., Ltd is also 50% owned by Tianjin Hai Tai Group Co., Ltd

^{*6} Virtual Home Health Care L.L.C. is also 51% owned by CBD Commercial Brokers LLC, Aetna's Nominee *7 Health Care Management Co. Ltd. Is also owned by Aetna Global Benefits (Bermuda) Limited (1 share).

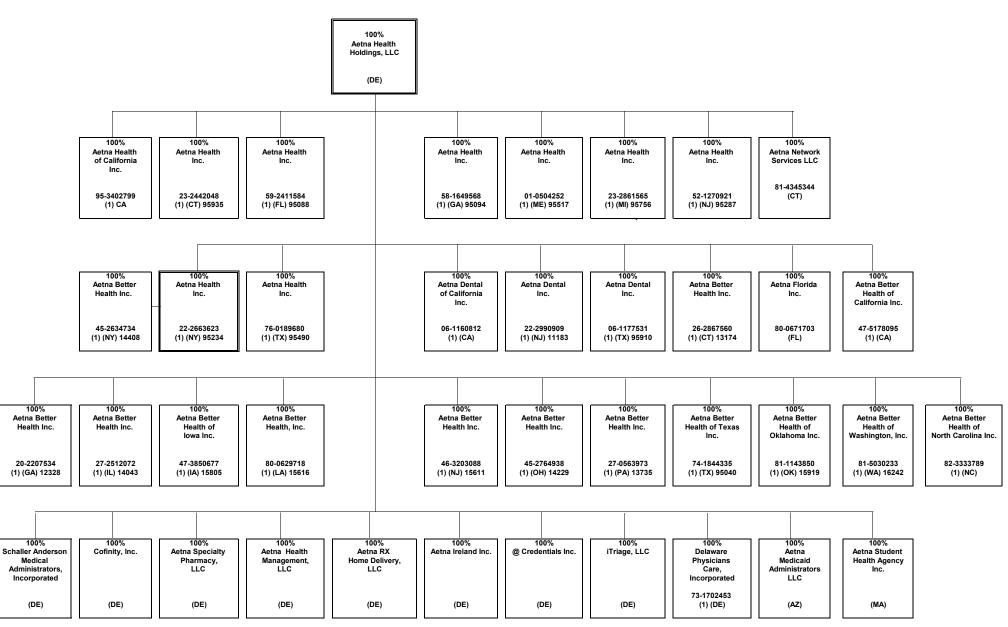
^{*8} Aetna Health Insurance (Thalland) Public Company Limited is also owned by Aetna Global Benefits (Bermuda) Limited (1 share), Mr. Sansanapongpherchar (1 Share), Mr. Jitphasong Itsaraphakded (1 Share); Mrs. Suphee Wattana (1 Share); and Mr. Buncha Tamphragom (1 Share)

^{*9} Aetna Holdings (Thailand) Limited is aslo 51% owned by Mr. Paiboon Sutantivorakoon plus Aetna Benefits (Bermuda) Limited owns 1 share.

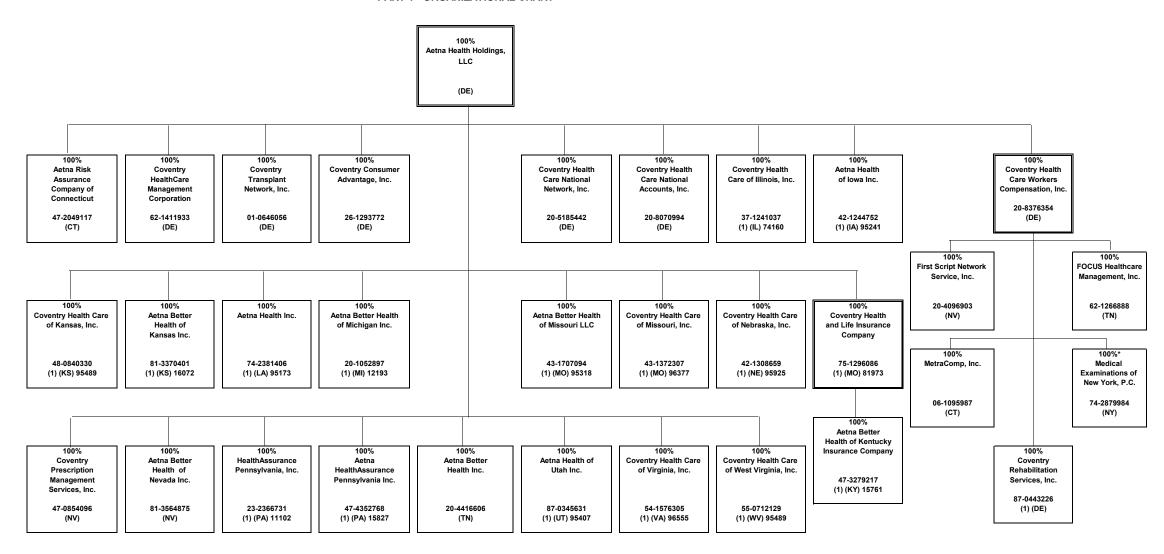
^{*10} Minor Health Entreprise Co, Ltd is is also (1 share) owned by Aetna Global Benefits (Bermuda) Limited

^{*11} Aetna Services (Thailand) Limited is also (1 share) owned by Aetna Global Benefits (Bermuda) Limited and (1 share) owned by Aetna Global Holdings Limited

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

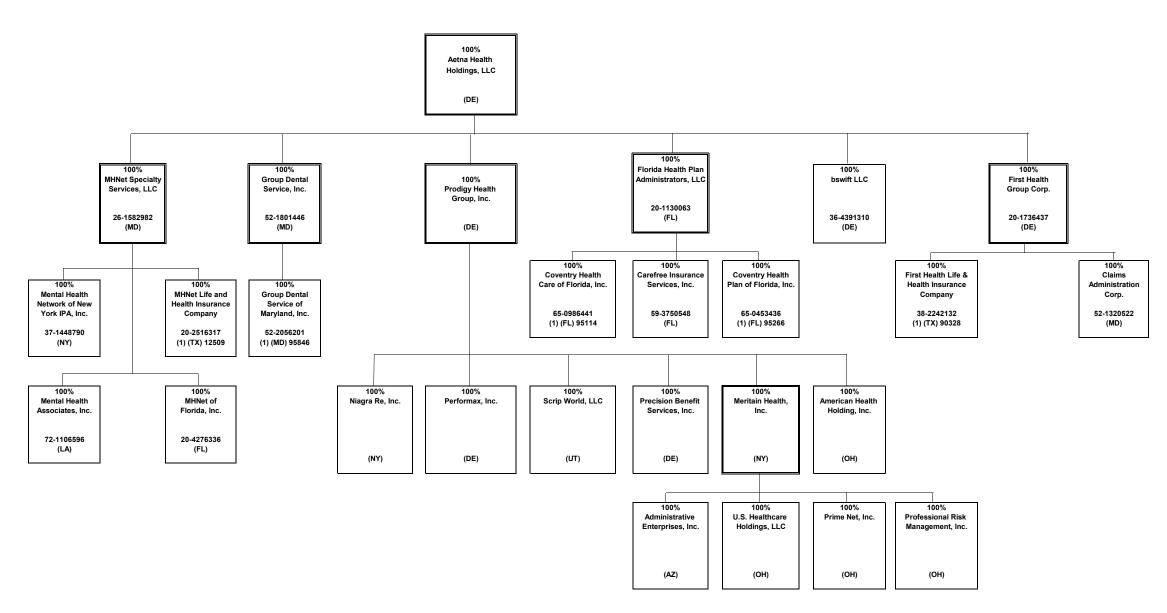


SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

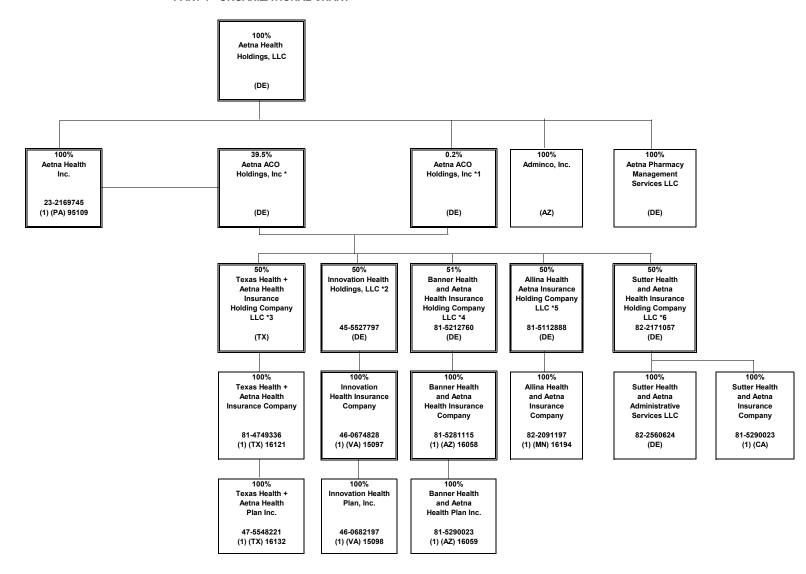


^{*100%} owned through Aetna's nominees

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP



SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP



^{*1} Aetna ACO Holdings Inc. is owned by Aetna Life Insurance Company (302 shares); Aetna Health Inc. (PA) (198 shares); and Aetna Health Holdings, LLC (1 share).

^{*2} Innovation Health Holdings, LLC is also 50% owned by Inova Health System Foundation.

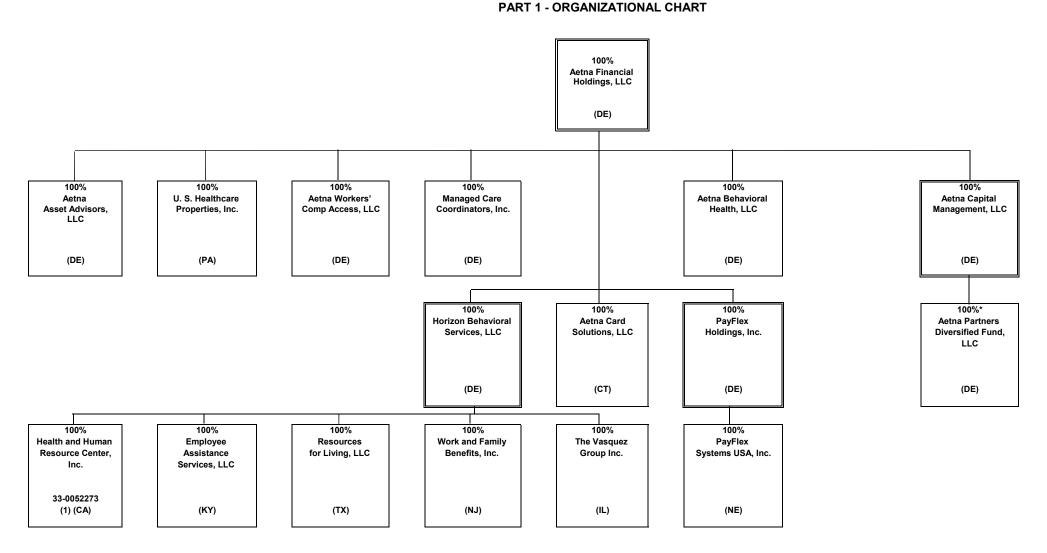
^{*3} Texas Health + Aetna Health Insurance Holding Company LLC is also 50% owned by Texas Health Resources.

^{*4} Banner Health and Aetna Health Insurance Holding Company LLC is also 49% owned by Banner Health.

^{*5} Allina Health and Aetna Insurance Holding Company LLC is also 50% owned by Allina Health.

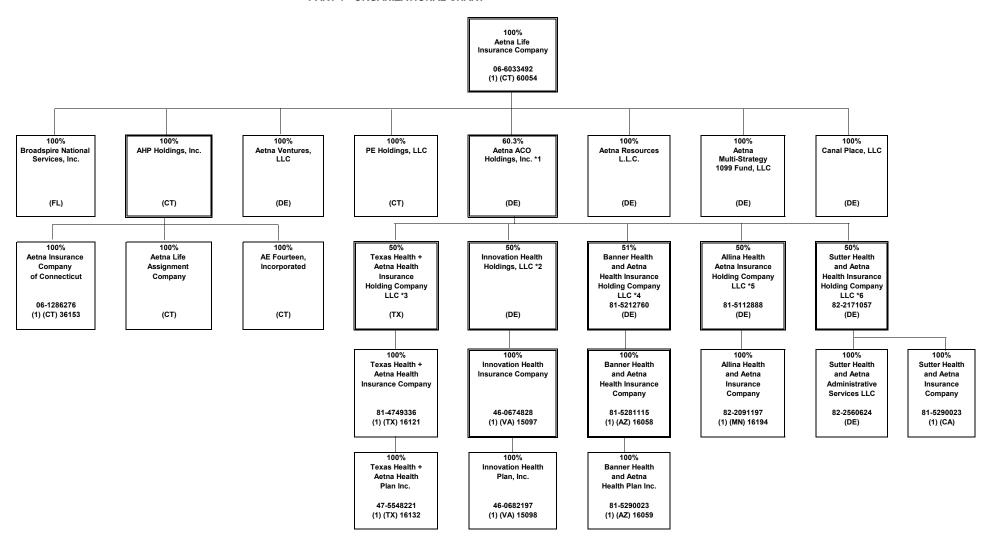
^{*6} Sutter Health and Aetna Insurance Holding Company LLC is also 50% owned by Sutter Health Plan Products Organization, LLC.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP



^{*} Aetna Life Insurance Company owns substantially all of the non-managing member interests of Aetna Partners Diversified Fund, LLC.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP



^{*1} Aetna ACO Holdings Inc. is owned by Aetna Life Insurance Company (302 shares); Aetna Health Inc. (PA) (198 shares); and Aetna Health Holdings, LLC (1 share).

^{*2} Innovation Health Holdings, LLC is also 50% owned by Inova Health System Foundation.

^{*3} Texas Health + Aetna Health Insurance Holding Company LLC is also 50% owned by Texas Health Resources.

^{*4} Banner Health and Aetna Health Insurance Holding Company LLC is also 49% owned by Banner Health.

^{*5} Allina Health and Aetna Insurance Holding Company LLC is also 50% owned by Allina Health.

^{*6} Sutter Health and Aetna Insurance Holding Company LLC is also 50% owned by Sutter Health Plan Products Organization, LLC.

OVERFLOW PAGE FOR WRITE-INS

NONE

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